

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE  
(Other instructions on reverse side)

Budget Bureau No. 1001-0135  
Expires August 31, 1985  
50 YEARS REGISTRATION AND AERIAL NO.

NM 03554

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

OIL WELL ☐ GAS WELL ☒ OTHER ☐

2. NAME OF OPERATOR

Caulkins Oil Company

3. ADDRESS OF OPERATOR

P.O. Box 340 Bloomfield, New Mexico 87413

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.  
See also space 17 below.)  
At surface

990' F/N and 1650' F/E

14. PERMIT NO.

15. ELEVATIONS (Show whether BP, AT, CA, etc.)

6630 GR

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Breech "C"

9. WELL NO.

144-E

10. FIELD AND FOOT, OR W/LOCAT

Basin Dakota

11. SEC., T., R., M., OR BLK. AND  
ADJACENT OR AREA

Section 12, ~~26~~ North 6 West

12. COUNTY OR PARISH 13. STATE

Rio Arriba

New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PCLL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON\*

REPAIR WELL

CHANGE PLANS

(Other)

Start Construction

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT\*

(Other)

(Note: Report results of multiple completion as Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROMISED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all nearbore and cone well-logs to this work.)

5-7-90 APD approval as amended April 6, 1989.

Approval for extension April 9, 1990.

This notice to advise approximate starting date May 10, 1990.

RECEIVED  
MAY 24 1990  
OIL CON. DIV.  
DIST. 3

18. I hereby certify that the foregoing is true and correct

SIGNED

*Charles Dyer*

TITLE

Superintendent

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

NMOCD

DATE

FORWARDED FOR RECORD

SM

\*See Instructions on Reverse Side