Form 9-331 (May 1963)

UNITED STATES SUBMIT IN TRIPLICATE* DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side)

Form approved Budget Bur av

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Albertania anno Alabe Comm. Com a	OTICES AND REPO	or alor back to a different cemers	6. II	F INDIAN, ALLOTTRE		
1.	7. 0	7. UNIT AGREEMENT NAME				
OIL GAS WELL X OTH 2. NAME OF OPERATOR		Unit D				
Bolin Oil Company 3. ADDRESS OF OPERATOR		_ Candado 9. WELL NO.				
1120 Oil & Gas Bldg. 4. LOCATION OF WELL (Report local See also space 17 below.) At surface		15 10. FIELD AND POOL, OR WILDCAT So. Blanco-Otero				
Well #15 is located 6	11. N	11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA NW 4/ NW 4 Sec. 25-26N-7W				
14. PERMIT NO.	15. ELEVATIONS (Show w	hether DF, RT, GR, etc.)		COUNTY OF PARISH		
Administrative Order NSL-733	GL-6547 RKB-6	558	<u>R</u>	io Arriba	N.M	
	k Appropriate Box To Ind	icate Nature of Notice, Re	port, or Other	Data		
	INTENTION TO:			UENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF		REPAIRING W	BLL	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREAT	MENT X	ALTERING CA	BING	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACT	DIZING	ABANDONMEN	T*	
REPAIR WELL	CHANGE PLANS	(Other)	port results of m	ultiple completion o	n Well	
(Other)	(6)	Completion	or Recompletion	Report and Log for	<u>m.)</u>	
17. DESCRIBE PROPOSED OR COMPLET proposed work. If well is on nent to this work.)* Surface casing set:	prectionally drined, give subsur	igee locations and measured and	true vertical dep	ths for all markers	and zones pert	
Production Casing 5½' Cemented with 485 sac Perforated Chacra Zor	ks cement using DV	tool to get cement	to circul	ate to surfa	ace.	
Fractured with slick	water frac-50,000	gal. water & 23,000	# Sand.			
Perforated Pictured (Cliff Zone: 2 hole	es per ft.: 2688' 2716-	-2706' 2724'		FEA - Na Mary 19	
Fractured with slick	water frac-53,800 g			R	Agina Say	
		·		APR BIL	1273	
18. I hereby certify that the foreg	oing is true and correct		11 1		1:3	
SIGNED	TIT	LE 1104 11	21/12	DATE .	17	
(This space for Federal or Sta	te office use)					
APPROVED BY		'LE		DATE	<u> </u>	
CONDITIONS OF APPROVAL	, ID ANI:			APR 2	197 6	

*See Instructions on Reverse Side

COPY TO JOHNELL

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