

UNITED STATES DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
WELL LOGGING SURVEY

WELL NO. 101010

50 DAY NOTICE AND REPORTS ON WELLS

(Check appropriate box to indicate whether to drill or to deepen or plug back to a different reservoir.  
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1. OIL WELL <input type="checkbox"/> WATER WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	4. AGREEMENT NAME
2. NAME OF OPERATOR B. H. KEYES	5. LEASE OR LEASE NAME MOCKEY
3. ADDRESS OF OPERATOR Box 842, Aztec, N.M. 87410	6. WELL NO. 3
7. LOCATION OF WELL (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)	8. COUNTY AND PARISH OR STATE West Pecos - FC
9. ELEVATION (Show whether 15, 20, or 25 ft. or more)	10. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 20 T27N-R11W
11. PERMIT NO.	12. COUNTY OR PARISH 13. STATE San Juan N.M.

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	ALTER OR ALTER CASING <input checked="" type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input checked="" type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	(Other) <input type="checkbox"/>

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

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

5 1/2" casing was set to 1838. The well was fractured open hole below casing from 1838-64.

It is planned to cleanout the open hole and set 2-7/8" tubing to bottom and cement to surface with 141 sx.

The Pictured Cliffs will be selectively perforated, and fractured and placed back on production.

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

SIGNED Curtis J. Little TITLE Agent DATE November 21, 1980

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

NMOCC

\*See Instructions on Reverse Side