

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)DATE RECEIVED
BY
AGENCY

-31772-

U. S. GEOLOGICAL SURVEY

SUNDRY NOTICES AND REPORTS OF WELLS

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

1. OIL WELL ☐ GAS WELL ☒	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Aztec Oil & Gas Company	8. FARM OR LEASE NAME Reid
3. ADDRESS OF OPERATOR P. O. Drawer 570, Pecos, New Mexico	9. WELL NO. #22
4. LOCATION OF WELL (and location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1130 FSL & 1890 FWL Section 7-28N-9W	10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Section 7-28N-9W
15. ELEVATIONS (Show whether DF, AT, CR, etc.) 5834 CR	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

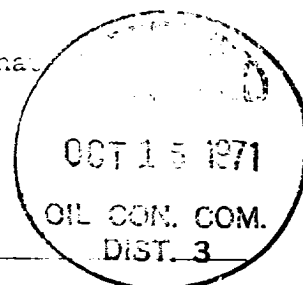
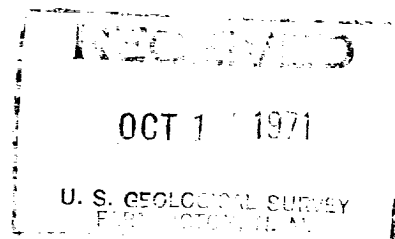
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		REPORT OF:	
TEST WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRAC TURE TEST	☒	ENTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDONMENT*	☐
REPAIR WELL	☐		
(Other)	☐		

17. DESCRIBE PROPOSED OR COMPLETED OPERATION, Clearly state all pertinent details of proposed work. If well is directionally drilled, give surface location, bearing, and distance to this work.*

PROPOSE TO:

- (1) Pull tubing.
- (2) Set Bridge Plug @ 6563'.
- (3) Set Retrievable Bridge Plug @ 6510'.
- (4) Squeeze perfs from 6476-6488' with 150 sacks.
- (5) Clean out to Bridge Plug @ 6563'.
- (6) Test casing to 2500#.
- (7) Run Corrosion Log.
- (8) Run back-up detonator on wire line & release on bottom.
- (9) Set modified Gearhart-Owen Packer with pump out plug approximately three feet above the top perforations.
- (10) Run primary detonator on wire line & release on packer.
- (11) Transfer 8500# GOI-4 Explosive to casing. Pump down & detonate.
- (12) Clean out to TD & restore to production.



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

SIGNED: [Signature] TITLE: District Superintendent DATE: October 1971

(This space for Federal or State Office Use)

APPROVED BY: _____ TITLE: _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY:

*See instructions on Reverse Side