Form approved.
Budget Bureau No. 42-R1424.

DEPARTMENT OF THE INTERIOR (Other instructions on reverse side)

GEOLOGICAL SURVEY

5. LEASE DESIGNATION AND SERIAL NO.: SF-077874

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

OIL WELL ☐ GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME:

2. NAME OF OPERATOR: Aztec Oil & Gas Company

8. FARM OR LEASE NAME: Davis

3. ADDRESS OF OPERATOR: Drawer 631, Farmington, New Mexico

9. WELL NO.: 2

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

10. FIELD AND POOL, OR WILDCAT:

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA:

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

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:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other) ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDIZING ☐
(Other) Spud & Set Surface Casing ☑

(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.)*

7-8-69 Ran 3 joints 8-5/8" 24# casing set @ 111'. Cement w/80 sx class B 2% cc.. Pressure test casing 500# - OK. Plug down 6:00P.M.

RECEIVED
JUL 28 1969
OIL CON. COM.
DIST. 3

U. S. GEOLOGICAL SURVEY

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

SIGNED: [signature] TITLE: District Superintendent DATE: 8-25-69

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side