

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other Instructions on Reverse Side)Form approved
Budget Bureau No. 42 R1274
5. LEASE DESIGNATION AND SERIAL NO.NM - 33016
6. IF INDIAN, ALLOCATED QUOTE NAME

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.)

1. OIL WELL ☐ GAS WELL ☒ OTHER ☐	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Patrick Petroleum Corporation of Michigan	8. FARM OR LEASE NAME STP Federal
3. ADDRESS OF OPERATOR 388 Denver Club Building, Denver, CO 80202	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790' FNL and 2375' FWL of Section 17, T27N, R12W	10. FIELD AND FLOOD, OR WILDCAT Basin Dakota
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T27N, R12W
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5739 GR	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF ☐	PULL OR ALTER CASING ☐	WATER SHUT-OFF ☒	REPAIRING WELL ☐
FRACTURE TREAT ☐	MULTIPLE COMPLETE ☐	FRACTURE TREATMENT ☐	ALTERING CASING ☐
SHOOT OR ACIDIZE ☐	ABANDON* ☐	SHOOTING OR ACIDIZING ☐	ABANDONMENT* ☐
REPAIR WELL ☐	CHANGE PLANT ☐	(Other) ☐	

(Other) ☐ (Noting 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 and 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.)*

Spudded well at 5:00 p.m. 7-15-79. Ran 240' 8-5/8" O.D. 24#/ft. K-55 ST&C casing. Downhole cemented surface casing at 255' K.B. w/225 sx class "H" cement 2/2% CaCl₂. Circulated w/good return. WOC 12 hrs.

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

SIGNED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY

TITLE

TITLE

LeCLAIR-WESTWOOD, INC., Agent

Production Engineer

DATE July 25, 1979

DATE

*See Instructions on Reverse Side

nmoc