

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPlicate*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

LEASE DESIGNATION AND SERIAL NO.

SF-080781

INDIAN, ALLOTTEE OR TRIBE 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

2.

NAME OF OPERATOR
Aztec Oil & Gas Company

3.

ADDRESS OF OPERATOR
Drawer 570, Farmington, New Mexico

4.

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

810 FNL & 1460 FNL, Sec. 16-28N-10W

14. PERMIT NO.

15. ELEVATIONS (State whether DE, ST, CR, etc.)

5868 CR

UNIT AGREEMENT NAME

FARM OR LEASE NAME

Cain

WELL NO.

19

FIELD AND POOL, OR WILDCAT

Pictured Cliffs

SEC., T., R., M., OR BLM. AND SURVEY OR AREA

Sec. 16-28N-10W

COUNTY OR PARISH

San Juan

18. STATE

New Mexico

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)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

Speed Report

(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.)*

6-28-69 Rig up rotary. TD 178'. Ran 5 joints 8-5/8" 24# casing. Landed 178' cement w/100 sg class A, 2% cc. Pressure test casing 500# - OK. Plug down 8:00P.M.



RECEIVED

JUL 25 1969

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

SIGNED

John C. Salas

TITLE

District Superintendent

DATE

7-24-69

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side