

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

I-149-IND-8477

6. IF 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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME Gallegos Canyon Unit NP
2. NAME OF OPERATOR Clinton Oil Company	8. FARM OR LEASE NAME
3. ADDRESS OF OPERATOR P. O. Box 2434, Casper, Wyoming 82601	9. WELL NO. 140
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1915' FSL, 2070' FWL, Sec. 29, T28N, R12W	10. FIELD AND POOL, OR WILDCAT Cha Cha Gallup
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5555' GL
	12. COUNTY OR PARISH San Juan
	13. STATE New Mex.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" 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.)*

Casing: 8 5/8" 135'
4 1/2" 5300'Cement: Circulated to surface
2 stages 350 sks

TD 5300' PBTD 5252'

Perfs: Gallup 5203' - 5211'

Packer: Baker Model "D" at 5074'

15 sks 5074' to 4885'

15 sks 4126' to 4000'

30 sks 50' in and 50' out of casing stub

30 sks 2100' to 2000' if casing stub is below this point

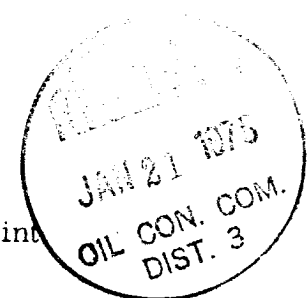
30 sks 50' in and 50' out of surface casing

10 sks top of surface casing 32' to G. L.

Spaces between plugs filled with heavy mud.

Surface cap and marker

Location thoroughly cleaned



JAN 20 1975

U. S. GEOLOGICAL SURVEY

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

Rocky Mountain District

SIGNED

TITLE

Production Engineer

DATE Jan. 15, 1975

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: