

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 42-R1424.  
5. LEASE DESIGNATION AND SERIAL NO.

SF-078863

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR R & G Drilling Company		8. FARM OR LEASE NAME Krause	
3. ADDRESS OF OPERATOR c/o Walsh Eng. & Prod, Corp. P.O.Box 254 Farmington,		9. WELL NO. 71	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1450'FNL, 1090'FEL		10. FIELD AND POOL, OR WILDCAT Kutz Fruitland	
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 32-T28N-R11W N.M.P.M.	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6005'GR, 6019'DF, 6020' KB		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 <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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" 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 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.)\*

1/30/79 Spud WELL  
1/31/79 T.D. - 144'  
Ran 3 jts. 8-5/8", 24.0 lb., K-55 casing (129.44'). Set at 144' with 125 sacks Class "B" Cement with 3% Calcium Chloride. Cement circulated. Test casing with 500 psig. Test ok.

2/3/79 T. D. 2060;  
Ran 65 jts., 4½", 10.50 lb., K-55 casing (2050.92') set at 2061.92' with 110 sacks 65/35 Pozmix with 12% gel and 6-1/4 lbs. Gilsonite per sack followed by 283 sacks 50/50 Pozmix with 6-1/4 lbs. Gilsonite and 6 lbs. salt per sack. Cement circulated.  
P.B.T.D. - 1777'. Top Pictured Cliffs - 1846'. Top Lewis - 2000'. Will not attempt completion in Pictured Cliffs at this time. Casing cemented inside and outside from 1777' to 2061'.

FOR: R & G DRILLING COMPANY

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

SIGNED Ewell N. Walsh, P.E.

TITLE President, Walsh Engin. & Prod. Corp.

DATE 2/6/79

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

\*See Instructions on Reverse Side

NMOCC

