

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424

5. LEASE DESIGNATION AND SERIAL NO.

SF 078596

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Lively

9. WELL NO.

9

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 3, T29N, R8W

12. COUNTY OR PARISH 13. STATE

San Juan

N.M.

14. PERMIT NO.

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

6290' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other)

(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.)*

4-6-73

W.O.C. at 280'. Spudded at 10:00 a.m. 4-5-73. Drilled 15" hole to 280'. Ran 9 jts. 9-5/8" O.D., 32.40#, H-40 ST&C casing set at 272' RKB. Cemented with 250 sacks Class "A" with 1/4# gel flake per sack, 2% CaCl. P.O.B. 11:15 p.m. 4-5-73. 2 hrs start motors - 3 hrs drill rat and mouse holes - 7 3/4 hrs drill surface hole - 3/4 hrs circulate and survey - 3 hrs trip out and rig up to run casing - 1 3/4 hrs run casing - 1/4 hr cement - 4 3/4 hrs W.O.C. and nipple up.



APR 11 1973

GEOLOGICAL SURVEY

18. I hereby certify that the foregoing is true and correct
Original signed by I. A. Dugan

SIGNED

Thomas A. Dugan

TITLE

Engineer

DATE

4-9-73

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side