

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE
(Other instructions on re-
verse side)

Date approved:
District Office No. 12-11-21
5. LEASE REGISTRATION AND SURVEY NO.

SF-078198

6. 1/4 INTEREST, ALLOTTEE OR TRACT NO.

SUNDARY 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 Aztec Oil & Gas Company	8. FARM OR LEASE NAME Nye
3. ADDRESS OF OPERATOR P. O. Drawer 570, Farmington, New Mexico	9. WELL NO. #9
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 910 FNL & 990 FWL, Section 1-30N-11W	10. FIELD AND POOL, OR WILDCAT Fruitland Aztec PC
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5974 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:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☒

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

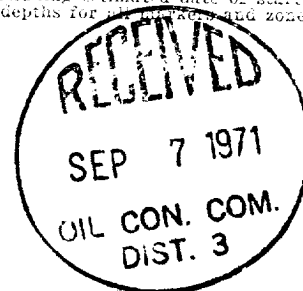
ALTERING CASING ☐

ABANDONMENT* ☐

(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 intervals and zones pertinent to this work.)*

1. Spot plug from 2300-2400'.
2. Spot plug from 1250-1300'.
3. Spot 5 sack plug at surface.
4. Set dry hole marker, clean location & abandon.



SEP 3 1971

NOTE: Well will be redrilled at 810 FNL & 960 FWL, Section 1-30N-11W.

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

SIGNED [Signature] TITLE District Superintendent DATE September 1, 1971

(This space for Federal or State office use)

APPROVED BY [Signature] TITLED DATE
CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side