

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved,
Budget Bureau

5. LEASE DESIGNATION AND NUMBER

SF 078198

6. IF INDIAN, ALLOTTEE OR TRIBE

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Nye

9. WELL NO.

#14

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Section 13-30N-11W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

P. O. 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

1780' FSL & 1570' FEL

Section 13-30N-11W

14. PERMIT NO.

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

6100 GR

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 markers and zones pertinent to this work.)*

11-16-71 Moved in, rigged up. Unable to pull tubing. Returned to production.
Rigged down.

RECEIVED

DEC 17 1971

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

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

SIGNED

TITLE

District Superintendent

DATE

December 17, 1971

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side