

6-USGS (Farmington) 1-File  
 Form 9-331 (May 1963)  
 UNITED STATES  
 DEPARTMENT OF THE INTERIOR  
 GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE\*  
 (Other instructions on reverse side)

Form approved.  
 Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.  
 NM 024158

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
 McKenzie

9. WELL NO.  
 1E

10. FIELD AND POOL, OR WILDCAT  
 Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
 Sec 20 T30N R12W

12. COUNTY OR PARISH  
 San Juan

13. STATE  
 NM

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)  
 5792' GR

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 COMPLETION	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input checked="" 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 type="checkbox"/>
(Other)	<input type="checkbox"/>		

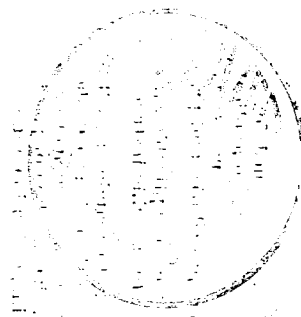
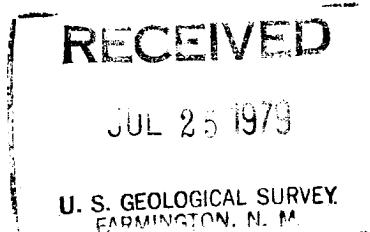
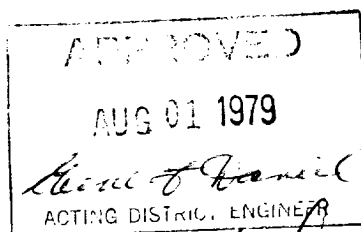
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

Plan to change APD approved July 18, 1979 as follows:

Instead of setting surface csg at 180', plan to:

Set surface csg at 550' through Ojo Alamo Formation and circulate cement to surface.



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

SIGNED

*Thomas A. Dugan*  
 Thomas A. Dugan

TITLE

Petroleum Engineer

DATE

7-24-79

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCC

