

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF-080776-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

N/A

7. UNIT AGREEMENT NAME

N/A

8. FARM OR LEASE NAME

Mansfield

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

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

Sec. 25-30N-10W

12. COUNTY OR PARISH

San Juan

13. STATE

N.M.

1.

OIL ☐ GAS ☒  
WELL WELL OTHER

2. NAME OF OPERATOR

Koch Exploration Company (Division of Koch Ind., Inc.)

3. ADDRESS OF OPERATOR

P.O. Box 2256; Wichita, Kansas 67201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*

See also space 17 below.)  
At surface

1850' FNL & 1000' FWL

14. PERMIT NO.

1463

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

GR 6127

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) Run surface casing

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

X

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.)\*

Spudded 14-3/4" hole @ 9:30 PM 2-7-80. Drilled 14-3/4" hole to 216'. Ran 4 jts

10-3/4" 40.5# K-55 ST&C csg. Csg set @ 216'. Cmted w/250 sx class "B" w/1/4#

celloflake & 2% CaCl. Cmt circ. Plug down @ 8:15 A.M. 2-8-80.



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

SIGNED

*Charles L. Schmitt*

TITLE

Operations Manager

DATE

2-11-80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FEB 13 1980

FARMINGTON COPY

\*See Instructions on Reverse Side

FARMINGTON DISTRICT  
BY *M. L. Kuchera*