

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

SUNDY 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 TO DRILL" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-01614
2. NAME OF OPERATOR New Mexico Oil and Gas Company	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Denver, CO, Farmington, New Mexico	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface	8. FARM OR LEASE NAME Thompson
9. PERMIT NO. 990 FNL & 990 FEL, Sec. 33-31N-12W	9. WELL NO. 5
10. FIELD AND POOL, OR WILDCAT Blanco MV-Basin Dakota	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 33-31N-12W
12. COUNTY OR PARISH San Juan	13. STATE New Mexico

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 type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input checked="" 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"/>	Dual Completion	<input checked="" 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.)\*

9-16-66 Moved on workover unit. Logged bottom 7064'. Cleaned out. Pulled tubing.  
 9-17-66 Ran Corrosion and bond logs. Perforated 5010-16, 5036-44, 5050-70, @ 2 SRF.  
 Sand-water fraced w/51,770 gal water, 40,000# 20/40 sand, 10,000# 10/20 sand.  
 EDP-1800, AIP-66 BPM. Running water and sand.  
 9-18-66 Gas cement retort at 2 1/2 SRF. 3 cement balls from 5010-70 w/150 st class "A"  
 cement, 25 CaCl. Perforated 4916-22, 4938-56, 2 SRF.  
 Frased w/63,050 gal water, 40,000# 20/40 sand, 10,000# 10/20 sand, dropped  
 55 balls, good ball action.  
 9-23-66 Drilled out cement around a bridge plug, cleaned cut to bottom.  
 9-24-66 Ran production packer with 2 1/2 jts 2-3/8" 8 rd EUE tubing landed 6025'.  
 10-13-66 MAV test:

STMP - 855 SIOF - 1000  
 SEP - 35  
 "A" Perforated 5010-16  
 5036-44

RECEIVED

JAN



APPROVED BY \_\_\_\_\_ DATE \_\_\_\_\_  
 CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_  
 CITY \_\_\_\_\_