

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. SF-077652
2. NAME OF OPERATOR Aztec Oil and Gas Company		6. INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR Drawer 570, 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 880 FSL & 1505 FWL, Sec. 25-31N-12W		8. FARM OR LEASE NAME East
14. PERMIT NO.		9. WELL NO.
15. ELEVATIONS (Show whether DF, ST, OR, etc.) 5992 Gr		10. FIELD AND POOL, OR WILDCAT Mesaverde-Dakota
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		11. SEC. T., R., M., OR SLM. AND SURVEY OR AREA Sec. 25-31N-12W
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.)*		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENTS* <input type="checkbox"/>
REPAIR WELL <input checked="" type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

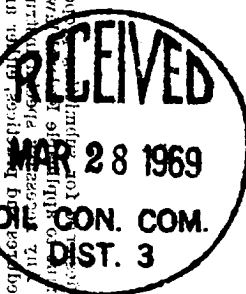
Propose to:

Pull 2-3/8" tubing
Pick up 2-7/8" drill pipe.
Go in hole and try to recover fish, top fish @ 6693
Drill out bridge plug
Clean up dakota formation
Rerun 2-3/8" tubing with Baker Model D production packer
set above Dakota perf.
Reconnect as Mesaverde - Dakota

RECEIVED

MAR 27 1969

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



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

SIGNED *J. C. Simon*

TITLE District Superintendent

DATE 3-26-69

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

