REPAIR WELL

(Other)

	UNITED STATES SUBMIT IN TRIPLICATE OF THE INTERIOR (Other instructions on respectively) DEPARTMENT OF THE INTERIOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
	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.)	SF-078146 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	OIL GAS X OTHER	7. UNIT AGREEMENT NAME
2.		8. FARM OR LEASE NAME
	Aztec Oil & Gas Company	Culpepper Martin
	P. O. Drawer 570, Farmington, New Mexico	9. WELL NO. #7-A
4.	LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1500' FSL & 850' FEL	Blanco Mesaverde 11. sec., T., R., M., OB BLK. AND SURVEY OR ARBA
		Section 28, T32N, R12N
14.	PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, CR, etc.)	12. COUNTY OR PARISH 13. STATE
	6095' GR	San Juan New Mexico
16.	Check Appropriate Box To Indicate Nature of Notice, Report, or	Other Data
	NOTICE OF INTENTION TO: SUBSE	QUENT REPORT OF:
	TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING Production Productions CHANGE PLANS (Other)	REPAIRING WELL ALTERING CASING ABANDONMENT* Tion tubing

(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.)*

Landed 161 joints of 2-3/8", 4.7#, CSR-55 tubing at 5135'. Total 5123.31'. Released rig at 9:00 A.M. 6-9-77

CHANGE PLANS



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18. I hereby certify that the foregoing is true and correspond to the signed to the si	ct	June 10, 1977
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATRECEIVED
		IUN 1 2 1077