orm 9–331 May 1963)	UN DEPARTME	IITED STATES NT OF THE I	S NTERIO	SUBMIT IN TRIPLICA (Other instructions on verse side)	re- Buaget	oproved. Bureau No. 42-R1424. TION AND SERIAL NO.	
GEOLOGICAL SURVEY					SF-078198		
SUNDRY NOTICES AND REPORTS ON WELLS						6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
				N WELLS k to a different reservoir. osals.)			
OIL GAS WELL X OTHER NAME OF OPERATOR Aztec Oil & Gas Company					7. UNIT AGREEME	7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME Nye	
					8. FARM OR LEASI		
					Nye		
. ADDRESS OF OPE					9. WELL NO.	9. WELL NO.	
P. O. Draw	er 570, Farming	gton, New Mex	cico		#3	#3	
See also space 1	L (Report location clear below.)	y and in accordance	with any Sta	ite requirements.*	10. FIELD AND PO	10. FIELD AND POOL, OR WILDCAT	
At surface	169	50 EST 8 000	EMI		Blanco Me	saverde	
1650 FSL & 990 FWL Section 1-30N-11W					11. SEC., T., R., M. SURVEY OR	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA	
					Section 1	-30N-11W	
4. PERMIT NO.	1	5. ELEVATIONS (Show v	vhether DF, RI	, GR, etc.)	12. COUNTY OR PA	ARISH 13. STATE	
	<u> </u>	591	1 GR		San Juan	New Mexic	
6.	Check Appro	priate Box To Inc	licata Nat	ure of Notice, Report, o	n Other Deter		
	NOTICE OF INTENTION		,				
		. 10.		SUB	SEQUENT REPORT OF:		
TEST WATER SE	UT-OFF PULI	OR ALTER CASING		WATER SHUT-OFF	REPAIR	ING WELL	
FRACTURE TREA	MUL!	CIPLE COMPLETE	<u>X</u> 1	FRACTURE TREATMENT	ALTERI	NG CASING	
SHOOT OR ACIDI	ABAN ABAN	idon*	_	SHOOTING OR ACIDIZING	ABANDO	NMENT*	
REPAIR WELL	CHAI	GE PLANS	_ `	(Other)	ults of multiple comple	tion on Well	
(Other)	ID OR GOVERNMENT OF THE	(0)		Completion or Reco	ults of multiple comple ompletion Report and La	og form.)	
PROPOSE	O: Pull tubing. Set Bridge Plu Perforate & Fr	g above Mesa ac Pictured 1 "D" Packer to Mesaverd	verde. Cliff. , set al e.	etails, and give pertinent das and measured and true ve	tes, including estimate ritical depths for all models for all mode	d date of starting any arkers and zones perti-	

19. I housely could be also also also also also also also also	
8. I hereby certify that the foregoing is true and correct SIGNED SIGNED District Superint	endent DATE April 3, 1973
(This space for Federal or State office use)	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:	DATE
*See Instructions on Reverse Side	