

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRI
(Other instruction
verse 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 ☐ GAS ☐ OTHER ☒ <u>WELL</u>		5. LEASE DESIGNATION AND SERIAL NO. <u>14-20-45-20432</u>
2. NAME OF OPERATOR <u>Claude C. Kennedy</u>		6. IF INDIAN ALLOTTEE OR TRIBE NAME <u>Navajo Tribal</u>
3. ADDRESS OF OPERATOR <u>1249 Chaco Ave., Farmington, New Mexico 87401</u>		7. UNIT AGREEMENT NAME <u>Del</u>
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface <u>265' Tol, 1485' Tol</u> <u>30-045-20432</u>		8. FARM OR LEASE NAME <u>Del</u>
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) <u>5033 Gr.</u>	9. WELL NO. <u>20</u>
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT <u>Slick</u>
NOTICE OF INTENTION TO: TEST WATER SHUT-OFF ☐ FRACTURE TREAT ☐ SHOOT OR ACIDIZE ☐ REPAIR WELL ☐ (Other) ☐ PULL OR ALTER CASING ☐ MULTIPLE COMPLETE ☐ ABANDON* ☒ CHANGE PLANS ☐		11. SEC., T., R., M. OR BLK. AND SURVEY OR AREA <u>20</u>
SUBSEQUENT REPORT OF: WATER SHUT-OFF ☐ FRACTURE TREATMENT ☐ SHOOTING OR ACIDIZING ☐ (Other) ☐		12. COUNTY OR PARISH <u>San Juan</u>
		13. STATE <u>N.M.</u>

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.)*

Per verbal instruction W.S.G.S., P. T. McGrath, this well will be abandoned as follows:

Surface casing 14",
Casing plug 150-20,
Bottom hole 666-TD/6,
Cut surface casing off 1' below ground level.

RECEIVED
MAR 20 1963
U. S. GEOLOGICAL SURVEY
FARMINGTON, N.M.

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

SIGNED Original Signed By:

CLAUDE C. KENNEDY

TITLE Operator

DATE 3-19-1963

(This space for Federal or State office use)

APPROVED

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

MAR 19 1963

P. T. McGRATH

DISTRICT ENGINEER

*See Instructions on Reverse Side