

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

N00-C-14-204402

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

N00-Navajo

9. WELL NO.

1

10. FIELD AND POOL, OR WILDCAT

Franciscan Lake Mesa Verde

11. SEC., T., R., M., OR BLK. AND  
SURVEY OR AREA

Sec 13 - 20N - 6W

12. COUNTY OR PARISH

McKinley

13. STATE

New Mexico

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 ☐  
WELL WELL OTHER

2. NAME OF OPERATOR

Basin Fuels, Inc.

3. ADDRESS OF OPERATOR

Suite 300, 300 West Arrington, Farmington, NM 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

340' FNL &amp; 350' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6729 GL

## 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## 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 ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☒FRACTURE TREATMENT ☒SHOOTING OR ACIDIZING ☒(Other) ☐REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐(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 perti-  
nent to this work.)\*

Moved in Farmington Well Service, Ran correlation log and perforated 2762-68.  
Swab tested 100% water. Set cast iron bridge plug at 2750'. Perforated 2723-27  
and 2730-35 two jets per foot. Acidized with 750 gallons 15% MCA. Swab tested  
3 barrels per hour with 10-30% oil cut. Fracture treated with 15,000 gallons  
gelled water and 6,000# 40-60 sand and 16,000# 20-40 sand. Ran rods and pump.  
Installed pumping unit and put well on test.

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

SIGNED

William T. Jones  
William T. Jones

TITLE

Agent

DATE 9-28-77

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

OCT 4 1977

\*See Instructions on Reverse Side

DURANGO OFFICE COPY