

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM 15646
2. Name of Operator Joel B. Burr, Jr.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 50, Farmington, NM 87499 (505) 325-1701	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FNL & 2310' FWL Sec. 13, T20N, R6W	8. Well Name and No. Robinson Coleman #1
	9. API Well No. 30-031-20528
	10. Field and Pool, or Exploratory Area Franciscian Lake MV
	11. County or Parish, State McKinley Co., NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

1. Propose to MIRU - NOWH - NU BOP
2. TIH w/f tubing 2364' and roll hole w/f 9# GEL
3. Spot cement plug 2364' - 2200'
4. TOH w/f tubing to 150' - spot cement plug 150-0'
5. ND BOP - Erect dry hole MK
6. Restore location

RECEIVED  
BLH  
92 OCT 13 PM 1:31  
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019 PM 1:31

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

Signed *[Signature]*

Title Agent

(This space for Federal or State office use)

Approved by  
Conditions of approval, if any:

Title

APPROVED  
AS AMENDED

OCT 19 1992

AREA MANAGER

NMOCD