

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		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 OF OPERATOR P.O. Box 50, Farmington, NM 87499		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 330' FNL 2310' FWL		8. FARM OR LEASE NAME Robinson Coleman
		9. WELL NO. 2
		10. FIELD AND POOL, OR WILDCAT Franciscan Lake Mesa Verde
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 13, T20N, R6W, NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6758 GL	12. COUNTY OR PARISH McKinley
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Well Status <input type="checkbox"/>	
(Other) <input type="checkbox"/>		(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.)\*

Request this well be placed in inactive status. Unable to repair this well at current crude oil prices: i.e. \$12.75 p/bbl. This well has not produced for the past ninety (90) days, but prior to going down for a defective pump it was making approximately six (6) bbls per day. It is believed that substantial reserves remain to be produced from this well, but only at higher oil prices. In addition, other zones remain untested behind the pipe but cannot be tested at current prices.

Casing in this well is sound and no contamination of other formations is contemplated.

RECEIVED  
BUREAU ROOM  
80 NOV 25 PM 1:11  
FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO

RECEIVED  
DECO 61988  
DEC 01 1989  
OIL CON. DIV.  
DIST. 3

THIS APPROVAL EXPIRES

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

SIGNED

Joel B. Burr, Jr.

TITLE Owner

DATE

11/21/88

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DEC 01 1988

James E. Edwards  
AREA MANAGER  
FARMINGTON RESOURCE

\*See Instructions on Reverse Side