

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-6999

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR James L. Ludwick	8. FARM OR LEASE NAME IRMA
3. ADDRESS OF OPERATOR P. O. Box 70 Farmington, New Mexico 87401	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 2260'BSL, 1980'FWL	10. FIELD AND POOL, OR WILDCAT WILDCAT
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 35, T19N-R5W
15. ELEVATIONS (Show whether DE, AT, OR, BELOW SURFACE) 6649' D. S. FARMINGTON, N. M.	12. COUNTY OR PARISH McKinley
	13. STATE New Mexico

16. 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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
PAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input checked="" type="checkbox"/>		

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

17. 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 waiver of Approval to Abandon.

After log re-evaluation: Request approval to re-enter hole, drill out cement plugs, perforate and sand water frac additional zone.

Surface has not yet been restored - same pits will be used. No additional surface disturbance will occur.

All provisions of original NTL-6 program as filed will be complied with.



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

SIGNED James F. Sims TITLE Agent

(This space for Federal or State use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

1. Approval for additional perforation and testing in the Point Lookout

2. Relief for 90 days

*See Instructions on Reverse Side
NM000

DATE 10-6-1982
APPROVED
AS AMENDED
DATE OCT 14 1982
JAMES F. SIMS
DISTRICT ENGINEER