

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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-23051
2. NAME OF OPERATOR GRAHAM ROYALTY, LTD.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. BOX 50127 MIDLAND TEXAS, 79710	7. UNIT AGREEMENT NAME FEDERAL
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1650/S - 790/W NW $\frac{1}{4}$, SW $\frac{1}{4}$ Sec. 7, T23N, R7W	8. NAME OR LEASE NAME FED.
14. PERMIT NO.	9. WELL NO. 7-13
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GL. 7119	10. FIELD AND POOL, OR WILDCAT LYBROOK GALLUP
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 7 T23N, R7W
	12. COUNTY OR PARISH RIO ARRIBA
	13. STATE N.M.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" type="checkbox"/>
(Other)	<input type="checkbox"/>		<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.)

8-31-87. MIRU. Install B.O.P. Pull 2 3/8 tubing-R.I.H. WITH OPEN ENDED TUBING, CIRCULATE HOLE W/ 5%KCL, 9.2#AT 6189'-SPOT 25sk. 3%KCL CLASS C PLUG ON TOP OF RBP. WAIT 3HRS. TAG PLUG @5820', PULL UP THE HOLE TO 5435' & SPOT 25 sk. 3% KCL CLASS C PLUG TO 5135', PULL UP THE HOLE TO 3540 & SPOT 25sk. 3%KCL CLASS C PLUG TO 3240', PULL UP THE HOLE TO 2040' & SPOT A 25sk. 3%KCL CLASS C PLUG TO 1660', PULL UP HOLE TO 1360' & SPOT A 25sk. 3% KCL PLUG TO 1060 (TOP OF Ojo Alamo), PULL UP HOLE TO 350 & CIRCULATE CEMENT TO SURFACE, 33sk. 3% KCL. R.D.M.O. WELD ON DRY HOLE MARKER W/ALL PERMENENT INFORMATION.
REMOVE DEADMEN, TAKE DOWN FENCE, BREAK LOCATION, BERM ROAD, AND RESEED AS TO B.L.M. SPECIFICATIONS.

Approved as to location of the well and
Liability and other matters
Surface location is correct.

SEP 28 1987

OIL CON. DIV.
DIST. 3

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

SIGNED [Signature] TITLE PRESIDENT/ SOROCO

DATE 8-31-87

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

*See Instructions on Reverse Side