

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

## 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. CONTRACT NO. 166	
2. NAME OF OPERATOR DYNA RAY OIL AND GAS CO., INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME JICARILLA	
3. ADDRESS OF OPERATOR 4101 E. Louisiana Avenue, Denver, Colorado, 80222		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 1780' from south line 990' from east line		8. FARM OR LEASE NAME JICARILLA R 166	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 7361 KB		10. FIELD AND POOL, OR WILDCAT SO BLANCO, PC	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29-23N-2W	
		12. COUNTY OR PARISH SANDOVAL	
		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"/>	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 checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <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.)\*

Well is non-productive. We propose to plug and abandon as follows:

1. Place 50 sack cement plug across perforations from 2942' to 2958'.
2. Cut off 4 1/2" casing. Pump 50 sack cement plug on 4 1/2" stub. Pull casing.
3. Pump 25 sacks into 8 5/8" surface casing.
4. Erect dry hole marker.

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

SIGNED

*J. J. Ray*

TITLE

*President*

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

11-25-70

DATE

\*See Instructions on Reverse Side

*St*