

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN REPLICATED
(Other: Instructions on reverse side)

Form approved
Budget Symbol No. 45-R1624

5. LEASE DESIGNATION AND SERIAL NO.
NM-16586

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"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR BCO, Inc.		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR 135 Grant Ave., Santa Fe, New Mexico 87501		8. FARM OR LEASE NAME Federal I	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1850' FNL 1700' FEL Sec. 33 T23N R7W		9. WELL NO. 1	
14. PERMIT NO.		10. WILDCAT WILDCAT Undesignated Gallup	
15. ELEVATIONS (Show whether DF, RT, CR, etc.) GR 6888		11. SEC., T., R. OR BLK. AND SURVEY OR AREA Sec. 33 T23N R7W	
		12. COUNTY OR PARISH Sandoval	
		13. STATE NM	

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"/>
REPAIR WELL	<input checked="" 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.)	<input type="checkbox"/>

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and pertinent to this work.)

May 11, 1988

Suspect well has casing failure. Well has begun producing very high percentage of water. Talked to Ken Townsend of BLM. Discussed procedure we will use to repair well: We will use bridge plug and packer to locate hole(s) and repair by cementing and squeezing. Received verbal permission to proceed. Will notify inspection and enforcement officer of BLM when cementing is scheduled.

RECEIVED
MAY 18 1988
OIL CON. DIV.
DIST. 3

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

SIGNED Elizabeth B. Keeshan

TITLE Vice President

DATE May 11, 1988

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE APPROVED

MAY 16 1988

NMOCC

AREA MANAGER