

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(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-7448
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME N/A
3. ADDRESS OF OPERATOR 115 Inverness Drive East, Englewood, CO 80112-5116		7. UNIT AGREEMENT NAME N/A
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 720' FSL & 660' FWL (SW SW) Section 22-T21N-R2W		8. FARM OR LEASE NAME Chijulla 22
14. PERMIT NO.		9. WELL NO. 13
15. ELEVATIONS (Show whether DP, ST, GR, etc.) 7396' GR		10. FIELD AND POOL, OR WILDCAT Rio Puerco Mancos
		11. SEC., T., R., N., OR S.E. AND SURVEY OR AREA SW SW 22-T21N-R2W
		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:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Request Long Term Shut In Status XX

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☐

(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.)\*

Gary-Williams Oil Producer, Inc. respectfully requests permission for a shut in status for the above mentioned well. Due to necessary repairs on an obsolete pumping unit that is no longer manufactured, it is uneconomical to repair this unit at this time.

There are no known problems with the casing integrity. Because of the existing condition of the well, GWOP requests that the testing requirements be waived at this time.

In the absence of an approved suspension, there may be a premature abandonment of the well and resulting loss of recoverable reserves.

THIS APPROVAL EXPIRES 12/4/88

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

SIGNED

*Nancy McDonald*

TITLE Compliance Administrator

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED  
DATE 12/1/87

DATE 12/4/88

AREA MANAGER  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

NMOCC