

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

**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 Form 9-331-C for such proposals.)

1. oil ☒ gas ☐ other ☐  
well well

2. NAME OF OPERATOR  
Samuel Gary Oil Producer, Inc.

3. ADDRESS OF OPERATOR  
#4 Inverness Ct E., Englewood, CO 80112

4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)  
AT SURFACE: 600' fs1, 630' fe1  
AT TOP PROD. INTERVAL: Same (Anticipated)  
AT TOTAL DEPTH: Same (Anticipated)

16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

REQUEST FOR APPROVAL TO:

TEST WATER SHUT-OFF ☐  
FRACTURE TREAT ☐  
SHOOT OR ACIDIZE ☐  
REPAIR WELL ☐  
PULL OR ALTER CASING ☐  
MULTIPLE COMPLETE ☐  
CHANGE ZONES ☐  
ABANDON\* ☐  
(other) Change Well Name

SUBSEQUENT REPORT OF:

RECEIVED  
OCT 31 1983  
BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

5. LEASE 19/50  
NM 44456  
6. IF INDIAN, ALLOTTEE OR TRIBE NAME  
N/A  
7. UNIT AGREEMENT NAME  
N/A  
8. FARM OR LEASE NAME  
San Isidro #11-16 (Formerly #11-16 Federal)  
9. WELL NO. #11-16  
10. FIELD OR WILDCAT NAME  
Undesignated Gallup  
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
11-20N-3W  
12. COUNTY OR PARISH | 13. STATE  
Sandoval | N.M.  
14. API NO.  
15. ELEVATIONS (SHOW DF, KDB, AND WD)  
6911' GR

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.)\*

Samuel Gary Oil Producer, Inc. hereby requests that the name of this well be changed from the #11-16 Federal to the #11-16 San Isidro.

Subsurface Safety Valve: Manu. and Type \_\_\_\_\_ Set @ \_\_\_\_\_ Ft.

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

SIGNED Ray Hagen TITLE Superintendent DATE 9/15/83

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

NOV 03 1983

\*See Instructions on Reverse Side

NMOCC

FARMINGTON RESOURCE AREA  
BY Edm