

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE
(Other instructions on reverse 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. Use "APPLICATION FOR PERMIT-" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT AGREEMENT NAME N/A	
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		8. FARM OR LEASE NAME San Isidro 28	
3. ADDRESS OF OPERATOR 115 Inverness Drive East, Englewood, CO 80112-5116		9. WELL NO. 8	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 732' FEL & 1848' FNL (SE NE) Section 28-T20N-R3W		10. FIELD AND POOL, OR WILDCAT Rio Puerco Mancos	
14. PERMIT NO. 6740' GR		11. SEC., T., R., M., OR S.E. AND SURVEY OR AREA SE NE 28-T20N-R3W	
15. ELEVATIONS (Show whether SP, ST, OR, etc.) 6740' GR		12. COUNTY OR PARISH Sandoval	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

<input type="checkbox"/> BEST WATER SHUT-OFF	<input type="checkbox"/> FULL OR ALTER CASING
<input type="checkbox"/> FRACTURE TREATMENT	<input type="checkbox"/> MULTIPLE COMPLETE
<input type="checkbox"/> SHOOTING OR ACIDIZING	<input type="checkbox"/> ABANDON*
<input type="checkbox"/> REPAIR WELL	<input type="checkbox"/> CHANGE PLANS
(Other) Request for Long Term Shut In <input checked="" type="checkbox"/>	

<input type="checkbox"/> 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*
(Other) _____	

(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 to continue the suspension of production on the above mentioned well. Current depressed oil prices make this marginal well uneconomical to produce.

There are no known problems with the casing integrity due to the fact that the cement was circulated to surface and the casing is less than 5 years old. 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

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

SIGNED Nancy McDonald

TITLE Compliance Administrator

DATE 5/29/87

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side

NMOCC

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.