

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 the surface.
Use "APPLICATION FOR PERMIT—" for such proposals.)

MAY 19 1986

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-36936
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 660' FNL and 660' FWL (NW NW) Section 14-T20N-R3W		8. FARM OR LEASE NAME San Isidro 14
14. PERMIT NO.		9. WELL NO. 4
15. ELEVATIONS (Show whether DF, HT, GR, etc.) 6848' GR		10. FIELD AND POOL, OR WILDCAT Rio Puerco Mancos
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW NW 14-T20N-R3W
		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 <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Request to temporarily SI well <input checked="" type="checkbox"/>	

SUBSEQUENT REPORT OF:

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* <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 and 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 approval to temporarily shut in the San Isidro 14, #4 well for an indefinite time period. Current depressed oil prices make this marginal well uneconomical to produce.

The San Isidro 14, #4 was shut in in March 13, 1986. Production during February, 1986 averaged 4.3 BOPD.

Approval for temporary shut in status for this well would prevent premature abandonment of significant recoverable hydrocarbon reserves.

RECEIVED

JUN 02 1986

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

THE APPROVAL OF THIS REPORT
IS HEREBY APPROVED

RECEIVED
JUN 13 1986
OIL CON. DIV.
DIST. 3

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

SIGNED W. B. Marx
(This space for Federal or State office use)

TITLE Operations Manager

DATE 5/12/86

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED
AS AMENDED

DATE _____

JUN 12 1986

AREA MANAGER

*See Instructions on Reverse Side
NMOCC