

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 a well or reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		JUN 03 1987		5. LEASE DESIGNATION AND SERIAL NO. NM-29168	
2. NAME OF OPERATOR Gary-Williams Oil Producer, Inc.		BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA		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 677' FEL & 2000' FSL (NE SE) Section 29-T21N-R3W				8. FARM OR LEASE NAME Tayler 29	
14. PERMIT NO.		15. ELEVATIONS (Show whether SP, ST, CR, etc.) 6954' GR		9. WELL NO. 9	
				10. FIELD AND POOL, OR WILDCAT Rio Puerco Mancos	
				11. SEC., T., R., E., OR S.E., AND SURVEY OR AREA NE SE 29-T21N-R3W	
				12. COUNTY OR PARISH Sandoval	
				13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other) Request Long Term Shut In

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>

<input type="checkbox"/>
<input type="checkbox"/>
<input type="checkbox"/>
<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 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.

Approved until 5/31/88

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

JUN 05 1987

June A. Iwata
OC-AREA MANAGER
FARMINGTON RESOURCE AREA

APPROVED

*See Instructions on Reverse Side

NMOCC