

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 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. c/o Ned Dollar, Agent		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P.O. Box 399, Aztec, NM 87410		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1980' FSL and 1980' FWL Section 13-T20N-R3W		8. FARM OR LEASE NAME San Isidro 13
RECEIVED OCT 15 1985		9. WELL NO. 11
		10. FIELD AND POOL, OR WILDCAT Rio Puerco Mancos
14. PERMIT NO.		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NE SW 13-T20N-R3W
15. ELEVATIONS (Show whether OF, TO, OR, etc.) 6879' GR		12. COUNTY OR PARISH: 13. STATE Sandoval 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 PLANE <input 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) \_\_\_\_\_

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. IS WELL 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.)\*

1. Equip with downhole packer assembly and seating nipples as shown on attached sheet.
2. Prior to beginning test, soft-set Amerada pressure bomb (7-day clock) in R-Nipple at bottom to tailjoint.
3. Rig up Nitrogen pump with 1mmcf of N<sub>2</sub> on location.
4. Establish 1st Stage rate so that pressure is around 300-400 psi. Maintain rate until pressure stabilizes, shut down to observe leak off rates.
  - A. Step-up rate to increase pressure to 500-600 psi. Maintain rate until 2nd Stage pressure stabilizes.
  - B. Continue with step-up rates at pressure increments of 200-300 psi until closure pressure is observed during leak off test.
  - C. See attached pump schedule.
5. Immediately upon shutting down N<sub>2</sub> Injection, run in hole with blanking plug on wire line (through lubricator) and set in F-Nipple above packer. This will assure a Bottom Hole shut-off for the pressure fall off test data which will minimize the effects of wellbore storage.
6. Leave well shut-in for the remainder of 7-day fall-of test.
7. At end of 7-days, equalize pressures as necessary and pull blanking plug and Amerada bomb. Open well to flow.

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

SIGNED

Ray Hager

TITLE Operations Superintendent

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

OCT 16 1985

APPROVED

DATE 10/6/85

OCT 15 1985

John Skellern  
AREA MANAGER  
FARMINGTON RESOURCE AREA

NMCCG OIL CONTROL

\*See Instructions on Reverse Side