

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-25604
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 1900' FNL and 2250' FEL (SW NE) Section 26-T20N-R3W	8. FARM OR LEASE NAME San Isidro 26
	9. WELL NO. 7
	10. FIELD AND POOL, OR WILDCAT San Isidro Mesaverde
	11. SEC., T., R., M., OR BLK. AND SURVEY OR ARMA SW NE 26-T20N-R3W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6997' KB
	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Reseeding</u>	

(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.)*

Unused portions of the above mentioned well has been reseeded during the current planting season.

RECEIVED
BUREAU OF LAND MANAGEMENT
WASHINGTON, D.C. 20250
AUG 11 1987

RECEIVED
AUG 20 1987
OIL CON. DIV.
DIST. 3

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

SIGNED Nancy McDonald TITLE Compliance Administrator ACCEPTED FOR 8/10/87

(This space for Federal or State office use)

APPROVED BY _____ TITLE AUG 19 1987

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

PARIAHUTON RESOURCE AREA
PARIAHUTON, NEW MEXICO