

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

1. OILWELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-57151
2. NAME OF OPERATOR Gary Williams Production Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME ALBUQUERQUE
3. ADDRESS OF OPERATOR 1775 Sherman St., Ste 1925 Denver, CO 80202 (303) 831-4673		7. UNIT AGREEMENT NAME SLV
4. LOCATION OF WELL AT SURFACE 1980' FSL, 660' FEL, Sec 11-T20N-R2W		8. FARM OR LEASE NAME Federal
		9. WELL NUMBER 11 - 9
		10. FIELD AND POOL, OR WILDCAT Chacra
		11. SEC., T., R., OR BLK. AND SURVEY SECTION 11 - T20N - R2W
14. PERMIT NO.	15. ELEVATIONS 6801' GL	12. COUNTY OR PARISH SANDOVAL
		13. STATE N.M.

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"/>	REPAIR 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 type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(OTHER) _____	<input type="checkbox"/>
OTHER <input checked="" type="checkbox"/>			

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS

Pursuant to our conversation with Shirley Mondy, the BLM Environmental Conditions of Approval pertaining to the requirement to have a lined reserve pit was waived since drilling mud was to consist of clear water only.

RECEIVED
APR 18 1994
OIL CON. DIV.
DIST. 3

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

SIGNED

TITLE

DATE

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

NMOCD