

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR BCO, Inc.	8. FARM OR LEASE NAME Federal G
3. ADDRESS OF OPERATOR 135 Grant Avenue - Santa Fe, New Mexico 87501	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660' FNL 660' FEL Sec 2 T22N R8W NMPM	10. FIELD AND POOL, OR WILDCAT Alamito Gallup
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 2 T22N R8W NMPM
15. ELEVATIONS (Show whether surface or subsurface) Gr 6901	12. COUNTY OR PARISH San Juan
	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 checked="" type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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 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.) *

9/24/85 - Shut well in with 750 pounds on tubing. Pumped 1500 gallons 7½% HCL double inhibited acid down casing followed with KCL water. KCL water was pumped down hole displacing all acid into formation. The acid was overdisplaced 10 barrels. Let set thirty minutes. Started pump jack to recover spent acid and KCL water, thereby, putting well back in production.

RECEIVED
OCT 03 1985
OIL CON. DIV.
DIST. 3

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

SIGNED Elizabeth B. Keeshan TITLE Comptroller DATE 9/25/85

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE OCT 02 1985

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA
*See Instructions on Reverse Side BY sm
NMOCC