

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)Form approved.  
Budget Bureau No. 42-R1424.

## 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 checked="" type="checkbox"/> <b>Dry Hole</b>	5. LEASE DESIGNATION AND SERIAL NO. <b>14-20-0603-9917</b>
2. NAME OF OPERATOR <b>Kerr-McGee Corporation</b>	6. IF INDIAN, ALLOTTEE OR TRIBE NAME <b>Navajo</b>
3. ADDRESS OF OPERATOR <b>215 Petroleum Center Building, Farmington, New Mexico 87401</b>	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 <b>1840° FNL and 1870° FEL, Sec 9, T23N, R20W</b>	8. FARM OR LEASE NAME <b>Navajo "M"</b>
	9. WELL NO. <b>1</b>
	10. FIELD AND POOL, OR WILDCAT <b>Wildcat</b>
	11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA <b>Sec 9, T23N, R20W, NMPH</b>
14. PERMIT NO.	12. COUNTY OR PARISH <b>San Juan</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>9116' GR ungraded</b>	13. STATE <b>New Mexico</b>

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) <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.)\*

Set the following cement plugs by balanced plug method using drill pipe:

Plug No. 1	250 axs	4048 to 4753'
Plug No. 2	50 axs	3455 to 3596'
Plug No. 3	50 axs	1903 to 2044'
Plug No. 4	50 axs	1216 to 1353'
Plug No. 5	10 axs	0 to 20'

Drilling mud is in the hole between plugs. A 10-ax plug was placed at surface and a 4 1/2" OD x 4' high dry hole marker was placed on top of the 9 5/8" casing and a steel cap welded between the casing and the marker. Work was completed on July 3, 1969. Casing left in the well is 9 5/8" OD 32.30# E-40 ST&C surface casing set at 1303' and cemented to surface. No casing was pulled. Notice will be given when pit has been filled and location ready for inspection. This work will be done as soon as the pit dries.

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

SIGNED

TITLE

Production Superintendent

DATE July 7, 1969

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

\*See Instructions on Reverse Side

U. S. GEOLOGICAL SURVEY  
FARMINGTON, N. M.

4 UCSS  
1 KLOCC  
1 Tibo  
1 JIFisher  
2 WAF  
1 BT