

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. SF 078562
2. NAME OF OPERATOR BCO, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 135 Grant, Santa Fe, New Mexico 87501		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 790' FNL - 790' FEL Sec 27 T24N R7W NMPM		8. FARM OR LEASE NAME Lybrook 7-27
14. PERMIT NO.		9. WELL NO. 7
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6939 DF		10. FIELD AND POOL, OR WILDCAT Escrito Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 27, T24N, R7W NMPM
		12. COUNTY OR PARISH Rio Arriba
		13. STATE NM

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 type="checkbox"/>
REPAIR WELL <input checked="" 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.)*

Believe well has a casing leak at approximately 3300'. Request approval to test for leak and squeeze with cement if leak can be isolated. Bureau of Land Management will be notified of cementing operation in sufficient time to witness if required.

This Sundry Notice is to replace Sundry dated 7/06/92 for Lybrook 7-27 #2 well. Original Sundry was submitted on form for wrong well. Lybrook 7-27 #2 does not have a casing leak.

RECEIVED

019 FARMINGTON, N.M.

92 AUG 12 PM 12:05

RECEIVED
BLM

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

SIGNED [Signature] TITLE Petroleum Engineer DATE August 11, 1992

(This space for Federal or State office use)

APPROVED BY [Signature] TITLE AREA MANAGER

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

AUG 12 1992

*See Instructions on Reverse Side
NMOCD