

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved
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 or to change a well.
Use "APPLICATION FOR PERMIT-" for such proposals.)

RECEIVED

1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME Escrito Gallup Unit
2. NAME OF OPERATOR BCO Inc.	8. FARM OR LEASE NAME Escrito Gallup Unit
3. ADDRESS OF OPERATOR 135 Grant Avenue, Santa Fe, New Mexico 87501	9. WELL NO. #14 (Judy 1)
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 790 FEL 790 FSL Sec 17 T24N R7W NMPM	10. FIELD AND POOL, OR WILDCAT Wildcat
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 17, T24N, R7W NMPM	12. COUNTY OR PARISH Rio Arriba
13. STATE NM	
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, BT, CR, etc.) GR 7305

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACURE TREAT

MULTIPLE COMPLETE

FRACURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANS

(Other)

(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.)*

- 5-27-86 - Went in with 2 3/8" tubing and tagged bottom at 3577' strapped pipe. Because of casing failure over perforations (3589'-3596') determined we couldn't swab to test Chacra. Tripped out of hole with tubing. Notified Mary Lee of BLM answering service at 5:15 p.m. that we would cement on 5-28-86.
- 5-28-86 - Perforated 2 .38" holes at 3446', 2 .38" holes at 2645', and 2 .38" holes at 2110'.

Went in with packer. Set packer at 3473'. Squeezed perforations from 3589'-3596' with 6.7 barrels of 50-50 POZ Class B cement mixed at 14.5 #s with a yield of 1.26,

Released pressure. No flow back so released packer. Tripped packer and tubing to 3539'.

Pumped 2.4 barrels of mud spacer weighing 9.2 #s. Pulled tubing to 3450'. Broke circulation with 1 barrel of water. Pumped 12.8 barrels of mud.

Mixed and pumped 2.4 barrels of cement to form plug from 3446'-3346'. Pumped 1 barrel of water behind cement. Pumped 3 barrels mud spacer. Displaced with 9.5 barrels water. Opened relief. Pressure held.

Pulled tubing to 2665'. Pumped 7 barrels mud. Pumped 1 barrel water. Mixed and pumped 2.4 barrels cement from 2645'-2545'. Pumped 1 barrel water behind cement. Pumped 1.7 barrels mud spacer. Displaced with 8 barrels water. Opened relief. Pressure held.

Pulled tubing to 2116'. Pumped 31 barrels mud. Pumped 1 barrel water. Mixed and pumped 5 barrels cement from 2110'-1910'. Pumped 1 barrel water behind cement. Pumped 5 barrels mud spacer. Opened relief. Pressure held.

Pulled tubing to 265'. Pumped 2 barrels water. Broke circulation. Mixed and pumped 6.2 barrels cement. Pumped 1 barrel water. Circulated .5 barrels of cement to pit.

Pulled all tubing out of hole. Tied on to Bradenhead valve. Pumped 5 barrels water at 500 #s. Mixed and pumped 13 barrels cement into Bradenhead valve at 550 #s. Displaced with 2 barrels water. Closed Bradenhead valve.

The BLM sent Doug Campbell to witness the plugging and abandonment procedure.

5-29-86- Cut off Bradenhead valve and cemented dry hole marker into place.

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

SIGNED Elizabeth B. Kashan TITLE Comptroller

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

NMOCC

AREA MANAGER