

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-23026

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

NONE

7. UNIT AGREEMENT NAME

NONE

8. FARM OR LEASE NAME

FEDERAL /8

9. WELL NO.

#11-~~28~~

10. FIELD AND POOL, OR WILDCAT

Gavilan PC - So. Blanco
Ext.

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec. 18, T24N-R1W

12. COUNTY OR PARISH

Rio Arriba

13. STATE

New Mexico

1. OIL ☐ GAS ☒ OTHER ☐
WELL WELL

2. NAME OF OPERATOR

KENAI OIL AND GAS INC.

3. ADDRESS OF OPERATOR

717 17th Street, Suite 2000, Denver, Colorado 80202

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface

705' FNL - 790' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

7437' GL

16. 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 ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETE ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOT OR ACIDIZE ☐

ABANDON* ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT* ☐

REPAIR WELL ☐

CHANGE PLANS ☐

(Other) ☐

Status: Drilling or completing X

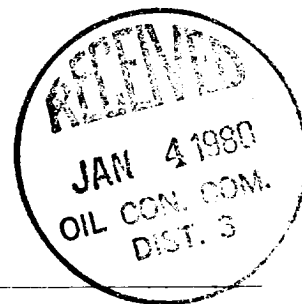
(NOTE: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

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.)*

12/29/79: MIRU Manus Drilling Rig #1, Spud 11" hole @ 12 noon.

12/30-31/79: Drilled 11" hole to 218' GL.

1/1/80: RU & ran 5 jts. (211.90'), 8-5/8" OD, 23#, J-55, 8RT, R3, new casing w/guide shoe and insert float. Landed csg @ 213' GL and cemented w/275 sxs. Class B cement plus 3% Calcium Chloride & 1/4# per sx. of Cello-Flake. Full returns while cementing & circ. 20 sx. (est) to surface. Plug down @ 4:30 p.m. Cement fell 1/2 ft. after cementing completed.



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

SIGNED

George B. Ladd

TITLE

Manager-Drilling & Production

DATE

1/2/80

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side