

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(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 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. 42	
2. NAME OF OPERATOR GREAT WESTERN ONSHORE INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache	
3. ADDRESS OF OPERATOR 1111 Bagby, Suite 1700, Houston, TX 77002-2595		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 985' FNL & 1120' FWL NE $\frac{1}{4}$ NW $\frac{1}{4}$		8. FARM OR LEASE NAME Martin-Whittaker	
14. PERMIT NO.		9. WELL NO. 56	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6663' GR		10. FIELD AND POOL, OR WILDCAT Lindrith Gallup-Dakota, We.	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18-24N-4W	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input checked="" type="checkbox"/> Temporarily Shut-In	

(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.)*

This well was temporarily Shut-in on August 16, 1994 due to hole in tubing. The well remains shut-in pending evaluation and waiting on weather to get into location. We plan to move in and evaluate well in the spring when location has dried out.

RECEIVED
MAR 23 1995
OIL CON. DIV.
BUREAU

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

SIGNED *[Signature]*

TITLE Supervisor, E & P Support

DATE 3/7/95

(This space for Federal or State office use)

APPROVED BY *[Signature]*

for Chief, Lands and Mineral Resources

MAR 21 1995

CONDITIONS OF APPROVAL, IF ANY:

DATE

*See Instructions on Reverse Side

Request to temporarily shut-in your Martin-Whittaker #56 well is approved through May 31, 1995.

If the well is not in production by that date you are to take one of the following actions:

1. Request approval to plug and abandon the well.
2. Request approval for temporary abandonment and include a schedule for casing integrity testing and well conditioning.
3. Request approval for shut-in status including a schedule for production verification and casing integrity testing.