

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 RECEIVED

(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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>		68 NOV 21 PM 12:52		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR DEKALB Energy Company		FARMINGTON RESOURCE AREA FARMINGTON, NEW MEXICO		8. FARM OR LEASE NAME MKL	
3. ADDRESS OF OPERATOR 110 16th Street - Suite 1000 - Denver, CO 80202		9. WELL NO. 15		10. FIELD AND POOL, OR WILDCAT Sp. Blanco - P.C.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 990' FNL, 990' FEL (NE/4 NE/4)		DEC 06 1988 OIL CON. DIV. DIST. 3		11. SEC., T., R., N., OR S.E. AND SURVEY OR AREA Sec. 5, T26N-R7W	
14. PERMIT NO. NA	15. ELEVATIONS (Show whether DF, ST, OR, etc.) 6637' GR	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:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PCLL 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 type="checkbox"/>	CHANGE PLANE <input checked="" 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.) *

Reference is made to your letter of November 2, 1988 concerning the shut-in gas well, MKL No. 15.

DEKALB Energy Company is presently in a contractual dispute with the buyer, El Paso Natural Gas. Estimate of contract settlement is 6 to 12 months. The settlement will put DEKALB in a position of being able to sell gas into the spot market or to an end user.

The MKL No. 15 well can then be put into shape to produce the reserves that are still available. Until that time, it is not feasible to recondition the well only to have it shut-in because EPNG refuses to purchase the gas.

As soon as this condition is remedied, DEKALB will submit a recompletion & stimulation proposal which is expected to return the MKL No. 15 well to a profitable economic status.

THIS APPROVAL EXPIRES DEC 01 1989

18. I hereby certify that the foregoing is true and correct		APPROVED	
SIGNED <i>John Styles</i>	TITLE Dist. Prod. Supt.	DATE November 17, 1988	
(This space for Federal or State Office use)			
APPROVED BY	TITLE	DEC 01 1988	
CONDITIONS OF APPROVAL, IF ANY:		<i>James E. Edwards Jr.</i> AREA MANAGER FARMINGTON RESOURCE AREA	

*See Instructions on Reverse Side
NMOCC