

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NO.	
(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.)		14-20-603-1349	
1. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
2. NAME OF OPERATOR		Navajo	
Atlantic Richfield Company		7. UNIT AGREEMENT NAME	
3. ADDRESS OF OPERATOR		8. FARM OR LEASE NAME	
Box 2197 Farmington, New Mexico 87401		Bittoney Nez	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)		9. WELL NO.	
At surface		1	
2310' FNL & 2310' FEL (Unit G) Sec. 23		10. FIELD AND POOL, OR WILDCAT	
		Bisti Lower Gallup	
		11. SEC., T., & M., OR BLK. AND SURVEY OR AREA	
		Sec. 23, T-25N, R-11W	
14. PERMIT NO.		12. COUNTY OR PARISH	
		San Juan	
15. ELEVATIONS (Show whether DF, RT, OR, etc.)		13. STATE	
GR 6562, RKB 6572		N. M.	

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input checked="" type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input checked="" 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 PLANS <input type="checkbox"/>	(Other) <u>Repair Casing Leak</u>	<input checked="" 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.)*

5 1/2" casing is set at 5174'. Perfs open 5086' - 5090' & 5101 - 5114'.

Well started producing water about October 3, 1972. Attempts to continue production were unsuccessful. On 11/10/72 moved in workover rig to check for casing leak. Determined leak in casing at 2958'. Squeezed hole w/50 SX Cl. "C" cement + 2% Cac/2 followed by 50 SX Cl. "C" cement + 0.5% Flac. Max. press 2000 psi. Drilled out cement and tested casing w/1500 psi O.K. Also, swabbed fluid level in casing to 3100' and had no fillin overnight.

Dowell treated perforations to restore production as follows using 2 1/2" tubing and packer set at 5023". Pumped in 8400 gal lease crude with Adomite MK II and J-257; followed by 1000 gals lease crude + 1000# 20/40 sand + Adomite and J-257; followed by 4000 gals lease crude + 3000# 20/40 sand; followed by 4000 gal lease crude + 4000# 20/40 sand. Job complete 11/18/72.

Cleaned out & resumed producing 11/21/72.

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

SIGNED

B. J. Santarini

TITLE Drlg. & Prod. Supv.

DATE 11/21/72

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side



NOV 27 1972

U.S. GEOLOGICAL SURVEY