

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DENOMINATION AND SERIAL NO.

14-20-603-1392

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Window Rock

7. UNIT AGREEMENT NAME

East Bisti Unit

8. FARM OR LEASE NAME

9. WELL NO.

4

10. FIELD AND FOOT, OR WILDCAT

Bisti Lower Gallup

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

Section 15-25N-11W

14. PERMIT NO.

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

6386' GR 6399' KB

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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REPAIRING WELL

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FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(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.)*

This well has reached the economic limit and is no longer profitable to operate. Plans are to plug and abandon this well; plugging as follows:

First Plug - 100' plug across Gallup Zone perforations 4892-4903'

Second Plug - 50' inside the 5-1/2" casing and 50' above where casing is shot in two

Third Plug - 150' cement plug extending downward from above the Fruitland Coal section across the Pictured Cliffs Sand

Fourth Plug - 100' plug at bottom of Ojo Alamo Sand (unless surface casing is set through the Ojo Alamo Sand)

10 sacks of cement in top of surface casing with dry hole marker



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

SIGNED

[Signature]

TITLE District Operations Supt.

DATE June 10, 1971

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

