

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. NOO-C-14-20-5250	
2. NAME OF OPERATOR Ludwick Exploration Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME NAVAJO ALLOTTED	
3. ADDRESS OF OPERATOR P.O. Box 70 Farmington, New Mexico 87401		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 960' FSL, 1685' FEL		8. FARM OR LEASE NAME EAST CARSON	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6499 Gr.		10. FIELD AND POOL, OR WILDCAT WILDCAT	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 23, T25N, R11W	
		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 <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 type="checkbox"/>	Production Casing <input checked="" 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.)*

11- 4-1980 TD 1360, PB 1350 Cemented 2-7/8 Production Casing.
Ran 44 joints, 2-7/8 casing, 6.5#, K-55, new casing,
landed @ 1360, cemented 125 sacks, Class 'B' cement,
2% CaCl, circulated 6 barrels, plug down 2:00 P.M.
WOC

11-17-1980 Perf 4 spf 1340-45 Pictured Cliffs.

11-19-1980 Treat with 1500 gal 15% Acid.

11-26-1980 Shut in for pressure build up.

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

SIGNED

TITLE Agent

DATE 11-28-1980

(This space for Federal or State official use)

APPROVED FOR RECORD
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

DEC 04 1980

FARMINGTON DISTRICT

*See Instructions on Reverse Side

NMOCC