

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(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. N00-C-14-20-5200	
2. NAME OF OPERATOR JEROME P. McHUGH		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Allotted	
3. ADDRESS OF OPERATOR P O Box 809, Farmington, NM 87499		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 930' FSL - 800' FWL		8. FARM OR LEASE NAME Lost Wapiti 15	
14. PERMIT NO.		9. WELL NO. 13	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6390' GL; 6402' KB		10. FIELD AND POOL, OR WILDCAT Bisti Lower Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 15, T25N, R11W, NMPM	
		12. COUNTY OR PARISH San Juan	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"/>	PULL 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 PLANS <input type="checkbox"/>	(Other) 5-1/2" csg. & cement <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.)\*

See attached for details of 5-1/2" casing & cement.

RECEIVED  
DEC 04 1987  
OIL CON. DIV.  
DIST. 3

18. I hereby certify that foregoing is true and correct

SIGNED James S. Hazen TITLE Field Supt. DATE 11/30/87

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

NMOCO

BY

JEROME P. McHUGH  
P O BOX 809  
FARMINGTON, NEW MEXICO 87499-0809  
505 326-7793

WELL: Lost Wapiti 15 #13

Reached TD of 5490' on 11/23/87.

Ran 13 jts. of 5-1/2", 17#, K-55, ST&C csg. & 138 jts. of 15.5#, K-55, ST&C csg. set at 5488' KB.

Float collar at 5447' KB & DV tool at 2984' KB.

Cemented as follows:

1st stage - 10 bbl. mud flush followed by  
510 sx 50/50 poz w/ 2% gel & 1/4#/sk celloflake (709 cu. ft.).  
Plug down at 9:49 pm.  
Opened DV tool & circulated w/ rig pump 2 hrs.

2nd stage - 10 bbl. mud flush followed by  
300 sx 65/35 poz w/ 12% gel, 6-1/4#/sk gilsonite & 1/4#/sk  
celloflake and 100 sx 50/50 poz w/ 2% gel & 1/4#/sk celloflake  
(total of 925 cu. ft. on 2nd stage).  
Plug down at 9:45 pm.

Full returns throughout cement job w/ show of cement on 1st stage  
and approx. 2 bbls. cement circulated to surface on 2nd stage.