

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT --" for such proposals

**SUBMIT IN TRIPLICATE**

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

**Redwolf Production, Inc.**

3. Address and Telephone No.

**P. O. Box 5382 Farmington, NM 87499 (505) 326-4125**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**990 FSL, 800' FWL  
Section 15, T25N, R11W**

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

**NOO-C-14-20-5200**

6. If Indian, Allottee or Tribe Name

**Navajo Allotted**

7. If Unit or CA, Agreement Designation

**Lost Wapiti 15 No. 13**

9. API Well No.

**30-045-26846**

10. Field and Pool, or Exploratory Area

**Bisti Lower Gallup**

11. County or Parish, State

**San Juan County, NM**

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	Return to Production.
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

The subject well was returned to production on January 14, 1998.

**RECEIVED**  
JAN 26 1998

**OIL CON. DIV.**

**DIST. 3**

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

Signed Dana S. Delventhal Title Vice President Date 1/19/98

(This space for Federal or State office)

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Conditions of approval, if any:

**JAN 22 1998**