						/		
Form 9-331 (May 1963)	2521	UNITED STATES SUBMIT IN TRIPLICATES DEPARTMENT OF THE INTERIOR (Other Instructions on re-				Form approved. Budget Bureau No. 42-R1424.		
	DEPA	DEPARTMENT OF THE INTERIOR (Other Instructions on re-				5. LEASE DESIGNATION AND SERIAL NO.		
GEOLOGICAL SURVEY						SF-078286-B		
(Do not use	UNDRY N this form for pi Use "APP	OTICES AND REP roposals to drill or to deeper LICATION FOR PERMIT—	PORTS C	N WELLS ack to a different reservoir.	6. IF IND	IAN, ALLOTTE	E OR TRIBE NAME	
OIL V GAS						7. UNIT AGREEMENT NAME		
OIL X GAS OTHER 2. NAME OF OPERATOR						Gallegos Gallup Sand Uni		
	l Company					OR LEASE NA	ME	
						9. WELL NO.		
1860 Lincoln Street - Denver, Colorado 80203 LOCATION OF WELL (Report location clearly and in accordance with any Stafe requirements.*						20		
See also space 17 below.) At surface 1650° FNL & 2310° FWL of Section 4-26N-12W						10. FIELD AND POOL, OR WILDCAT		
						Gallegos Gallup 11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA		
1000 This d 2010 Twis of Section 4-20N-12W					Sec.	Sec. 4-26N-12W		
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)				RT, GR, etc.)		TY OR PARISE		
·		5986 * K	В		San d	Juan	New Mexico	
FRACTURE TREASES HOOT OR ACIDI REPAIR WELL (Other)	,	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	<u>x</u>	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report res	alts of multiple	ALTERING C	ASING	
nent to this wo	rk.) •	drined, give subs	MITAGE ROCKE	Completion or Reco	tes, including e tical depths fo	stimated dat r all marker		
Plans are	to plug a	nd abandon this 1	well as	follows:				
Third	Plug - 10 ca h Plug - 1	00' plug above to asing is left real 100' plug at the is set through the	casing op of Me maining bottom he Oio A	5109'-5078' filli and 50' above whe sa Verde formation through this zone) of Ojo Alamo Sand lamo Sand). p of surface casin	ere casing (unless (unless s	z is sho product surface	t in two. ion casing	

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

JUNITLE District Superintendent

DATE Nov. 17, 1967

(This space for Federal or State office use)

APPROVED BY ______CONDITIONS OF APPROVAL, IF ANY:

TITLE

NOV 2 2 1967