

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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 type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/> SWD Well		5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-5019	
2. NAME OF OPERATOR Reading & Bates Petroleum Co.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Indian	
3. ADDRESS OF OPERATOR 3200 Mid-Continent Tower, Tulsa, OK 74103		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 1963'FSL & 977'FWL		8. FARM OR LEASE NAME Navajo Tocito	
14. PERMIT NO.		9. WELL NO. 4	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5105 GL		10. FIELD AND POOL, OR WILDCAT Tocito Dome	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 10-T26N-R18W	
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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 checked="" 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.)*

Circ hole w/9.2# mud.
Set CIBP @ 6332'.
Dump 4 sx cement on CIBP.
Shoot squeeze holes @ 5513'.
Squeeze cement 5413'-5513'.
Shoot squeeze holes @ 3560'.
Squeeze cement 3460'-3560'.
Shoot squeeze holes @ 2598'.
Squeeze cement 2498'-2598'.
Shoot squeeze holes @ 1724'.
Squeeze cement 1624'-1724'.
Shoot squeeze holes 1190'.
Squeeze cement 1090'-1190'.
Shoot squeeze holes 824'.
Squeeze cement 724'-824'.
Shoot squeeze holes 143'.
Cement 143'-surface.
Bradenhead squeeze 13-3/8—8-5/8 annulus.
Set DH marker.
Well P & A 3/8/88.

Approved as to planning of work by
Liability under bond is retained until
surface restoration is complete.

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

SIGNED Matthew C. Filbert

TITLE Sr. Engr. Technician

DATE 3-24-88

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE JUL 15 1988

NMOCO

*See Instructions on Reverse Side