

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE\*  
(Other instructions on reverse side)Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

SF 047039-B

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Kutz E Federal

9. WELL NO.

1570

10. FIELD AND POOL, OR WILDCAT

Basin Dakota

11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA

Sec. 17, T28, R10W

12. COUNTY OR PARISH  
San Juan13. STATE  
N.M.

## 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 ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Crown Central Petroleum Corporation

3. ADDRESS OF OPERATOR

7100 E. Belleview Ave., Suite 300 Englewood, Colorado 80111

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

RECEIVED

OCT 28 1965

Unit Letter - G

14. PERMIT NO.

15. ELEVATIONS (Show whether on or off, etc.)

BUREAU OF LAND MANAGEMENT  
FARMINGTON RESOURCE AREA

16.

## Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

## NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐FRACTURE TREAT ☐SHOOT OR ACIDIZE ☐REPAIR WELL ☐(Other) ☐PULL OR ALTER CASING ☐MULTIPLE COMPLETE ☐ABANDON\* ☐CHANGE PLANS ☐

## SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐FRACTURE TREATMENT ☐SHOOTING OR ACIDIZING ☐(Other) Temporarily Shut-in Well ☒

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

REPAIRING WELL ☐ALTERING CASING ☐ABANDONMENT\* ☐

17. DESCRIBE PROMISED 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.)\*

This sundry notice is submitted to notify your office that the captioned well was shut-in 4/1/85, due to the natural gas market conditions, and was also put back on production 10/14/85.

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

SIGNED B. G. Li Sooney *B. G. Li Sooney*

TITLE Production Engineer

ACCEPTED FOR RECORD 85

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

OCT 30 1985  
DATE

FARMINGTON RESOURCE AREA

BY *sm*

\*See Instructions on Reverse Side

NMOCC

