

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

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

Form approved.  
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

NM-0338690

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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  
CURTIS J. LITTLE

3. ADDRESS OF OPERATOR  
P. O. Box 2487, Farmington, N.M. 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
1190 FSL 2210 FEL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME  
Federal

9. WELL NO.  
2-11

10. FIELD AND POOL, OR WILDCAT  
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA  
Sec. 11-T28N-R13W

14. PERMIT NO.

15. ELEVATIONS (Show whether DP, RT, GR, etc.)  
5935 KB

12. COUNTY OR PARISH  
San Juan

13. STATE  
N.M.

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 COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <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 type="checkbox"/>
(Other) <input type="checkbox"/>	

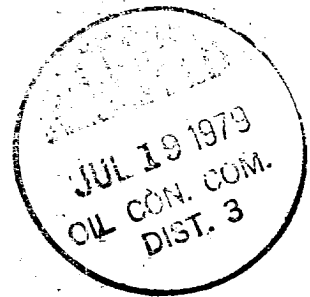
(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)\*

Plan to plug commencing July 16th as follows:

- 6090-6307 with 25 sx
- 5605-5820 with 25 sx
- 3130-3350 with 25 sx
- 1500-1860 with 40 sx
- 50- 266 with 25 sx

Install regulation dry hole marker.



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

SIGNED Curtis J. Little TITLE Operator DATE July 12, 1979  
Curtis J. Little

(This space for Federal or State office use)  
APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

\*See Instructions on Reverse Side

*Olaf*

*NMOCC*

*James Y. Lewis*