

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Form approved.  
Budget Bureau No. 1001-0135  
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 checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. <b>NM 18327</b>
2. NAME OF OPERATOR <b>FALCON SEABOARD GAS COMPANY</b>		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR <b>c/o DAVE SIMMONS P. O. BOX 48, FARMINGTON, NM 87499</b>		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) <b>1905' FSL &amp; 1604' FWL</b>		8. FARM OR LEASE NAME <b>29-4 CARSON 28</b>
14. PERMIT NO.		9. WELL NO. <b>1</b>
15. ELEVATIONS (Show whether DF, RT, GR, etc.) <b>7402' GR 7415' KB</b>		10. FIELD AND POOL, OR WILDCAT <b>BASIN FRUITLAND COAL POOL</b>
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA <b>SEC 28 T29N R4W</b>
		12. COUNTY OR PARISH <b>RIO ARRIBA</b>
		13. STATE <b>NM</b>

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 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 checked="" type="checkbox"/> <b>Squeeze cementing</b>	

(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.)\*

10-24-90 Moved rig to location. Ran Baker retrievable bridge plug and set at 1715' Pressure tested BP to 1000 psig for 10 minutes. OK. Perforated 2 squeeze holes at 1560' KB. Established injection rate with 25 bbls water. Cemented with 300 sacks (354 cu.ft.) Class "B" standard with 0.6% Halad 322. Displaced cement to 1150' and shut well in with 2000 psig on casing. Did not circulate cement to surface.

10-25-90 Wilson Service Company ran wireline temperature survey. Cement inside casing at 1145' KB. Cement top at 500 ft. KB. Called cement top in to BLM and received verbal approval of squeeze job from Mr. Townsend. Drilled out cement and pressure tested cement squeeze hole to 1500 psig for 30 minutes. Held. Circulated sand off bridge plug. Released bridge plug and tripped out of hole.

RECEIVED  
OCT 29 1990  
OIL CON. DIV.  
DIST. 3

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

SIGNED R. D. Simmons TITLE Agent  
(This space for Federal or State office use)

DATE 10-26-90

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

TITLE \_\_\_\_\_

ACCEPTED FOR RECORD

OCT 29 1990

NMOCD  
\*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY 22