

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Form approved.
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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		3. LEASE DESIGNATION AND SERIAL NO. Jicarilla Contract 464	
2. NAME OF OPERATOR Robert L. Bayless		4. IF INDIAN, ALLOTTEE OR TRIBE NAME Jicarilla Apache Tribe	
3. ADDRESS OF OPERATOR P.O. Box 168, Farmington, NM 87499		7. UNIT ASSIGNMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below) At surface 990' FNL & 790' FWL		8. FARM OR LEASE NAME Jicarilla 464	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether OP, RT, GR, etc.) 7126' GL 7138' RKB		10. FIELD AND POOL, OR WILDCAT Wildcat	
		11. SEC., T., R., M., OR BLK. AND SUBST OR AREA Sec. 32, T30N, R3W	
		12. COUNTY OR PARISH Rio Arriba	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 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"/>		<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) Spud; cement surface csg.	<input type="checkbox"/>		<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.) *

Revision--Sundry Notice dated 10/22/87

10-21-87 Spud well at 1:00 p.m. Drilled 147 ft. of 9-7/8" surface hole. Ran 3 jts. of 7-5/8", 26.4#/ft. S-95 LTC used casing, 131.31 ft., and landed at 143 ft. RKB. Rigged up Cementers Inc. and cemented surface casing with 60 sacks of Class "B" cement with 3% CaCl₂ (71 ft.³). Good circulation throughout job. Circulated cement to surface. Plug down at 6:00 p.m. 10/21/87. WOC.

RECEIVED
OCT 29 1987
OIL & GAS DIV
DENVER

18. I hereby certify that the foregoing is true and correct		
SIGNED <u>Kevin L. McQuinn</u>	TITLE <u>Engineer</u>	DATE <u>10/26/87</u>
(This space for Federal or State office use)		
APPROVED BY _____	TITLE _____	DATE <u>ACCEPTED FOR FILE</u>
CONDITIONS OF APPROVAL, IF ANY:		

*See Instructions on Reverse Side

FARMINGTON, NEW MEXICO