

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

Expires August 31, 1985
3. LEASE DESIGNATION AND SERIAL NO.
Jicarilla Contract 464
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.)

WELL ☐ NEW ☒ OTHER

1. NAME OF OPERATOR

Robert L. Bayless

2. ADDRESS OF OPERATOR

P.O. Box 168, Farmington, NM 87499

3. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below)

At surface 1525' ENL & 965' FEL

8. FARM OR LEASE NAME

Jicarilla 464

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

East Blanco P.C.

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Section 30, T30N, R3W

14. PERMIT NO.

15. ELEVATIONS (Show whether OF, RT, GR, etc.)

7219' GL 7231' RKB

12. COUNTY OR PARISH 13. STATE

Rio Arriba

NM

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

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF ☐

PULL OR ALTER CASING ☐

WATER SHUT-OFF ☐

REPAIRING WELL ☐

FRACTURE TREAT ☐

MULTIPLE COMPLETION ☐

FRACTURE TREATMENT ☐

ALTERING CASING ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT ☐

SHOOTING OR ACIDIZING ☐

ABANDONMENT ☐

REPAIR WELL ☐

CHANGE Casing ☐

OTHER

Cement bond log

X

NOTE -

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

17. DESCRIBE PROPOSED OR COMPLETED OPERATION: Clearly state in 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 perti-
nent to the work.

Cement bond log performed on 11/10/88 showing top of cement at 1800'. (Log attached)

RECEIVED
MAIL ROOM

60 NOV 29 PM 2:23

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

RECEIVED
DECEMBER
OIL CON. DIV.
DIST. 3

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

SIGNER Robert L. Bayless

TITLE Operator

DATE 11/28/88

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AMOCG

*See Instructions on Reverse Side