

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well
☒ Oil Well ☐ Gas Well ☒ Other P & A'd 6/11/93

2. Name of Operator
TIFFANY GAS CO.

3. Address and Telephone No.
P.O. Box 50, Farmington, NM 87499 505-325-1701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
2400' FWL & 540' FSL
Sec. 18-T29N-R16W
5018' GL

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
I-89-IND-58

6. If Indian, Allottee or Tribe Name
NAVAJO TRIBE

7. If Unit or CA, Agreement Designation

8. Well Name and No.
USG Sec. 18 #33

9. API Well No.
30-045-21275

10. Field and Pool, or Exploratory Area
HOGBACK DAKOTA

11. County or Parish, State
San Juan, NM

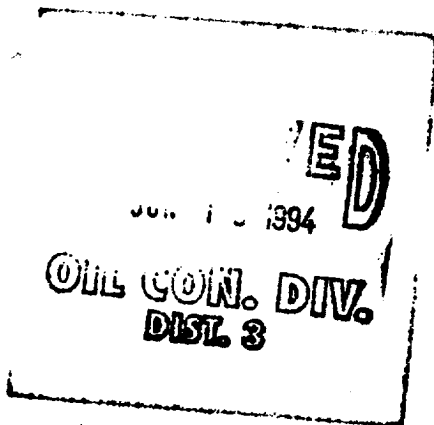
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Evaluate	<input type="checkbox"/> Dispose Water

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

13. 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.)*

Recent inspection of subject P & A'd well revealed that there was a slight oil seepage between the 5½" casing & the cement plug inside the casing. Tiffany Gas Co. requests a sixty (60) day evaluation period of this condition with the dry hole marker removed in order to make a daily assessment of this seepage.



RECEIVED
BLM
JUN 10 AM 10:52
070 FARMINGTON, NM

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

Signed Jim Hicks
(This space for Federal or State office use)

Title Agent, Tiffany Gas Co.

Date 6/9/94

Approved by _____
Conditions of approval, if any:

Title _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

UNITED STATES
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SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☒ Other P & A'd 6/11/93

2. Name of Operator

TIFFANY GAS CO.

3. Address and Telephone No

P.O. Box 50, Farmington, NM 87499 505-325-1701

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2400 ' FEL & 540' FSL
Sec. 18-T29N-R16W
5018' GL

5. Lease, Designation and Serial No.

I-89-IND-58

6. If Indian, Allottee or Tribe Name

NAVAJO TRIBE

7. If Unit or CA, Agreement Designation

8. Well Name and No.

USG Sec. 18 #33

9. API Well No.

30-045-21275

10. Field and Pool, or Exploratory Area

HOGBACK DAKOTA

11. County or Parish, State

San Juan, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Results of evaluation
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

13. 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.)*

A 90 day observation of subject well with dry hole marker removed has shown that the slight oil seepage between the I.D. of the 5½" casing and the internal cement plug is decreasing. The amount of oil accumulation ranged from moist (not measureable) to ¼" deep and sometimes ½" deep over 7 day periods.* Tiffany Gas Co. proposes to reinstall dry hole marker and to visually inspect weekly for further seepage.

*Steve Mason with the Farmington BLM has observed this condition.

RECEIVED
SEP 15 1994
OIL CON. DIV.
DIST. 3

RECEIVED
BLM
94 SEP 13 AM 10:59
070 FARMINGTON, NM

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

Signed Jim Hicks Title Agent, Tiffany Gas Co. Date 9/12/94

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

APPROVED

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*See Instruction on Reverse Side

BLM/CCT

SEP 14 1994
DISTRICT MANAGER

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

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SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other Previously P&A'd 6/11/93	5. Lease Designation and Serial No. I-89-IND-58
2. Name of Operator TIFFANY GAS COMPANY	6. If Indian, Allottee or Tribe Name NAVAJO TRIBE
3. Address and Telephone No. Post Office Box 50, Farmington, New Mexico 87499 505/325-1701	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2400' FWL & 540' FSL Section 18, T29N-R16W 5018' GL	8. Well Name and No. USG Sec. 18 #33
	9. API Well No. 30-045-21275
	10. Field and Pool, or Exploratory Area HOGBACK DAKOTA
	11. County or Parish, State SAN JUAN COUNTY, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Repair Casing Plug
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)*

Recent inspection of subject P&A'd well has revealed that a minute oil seepage between the 5½" casing and the cement plug inside the casing is occurring again. Tiffany Gas Company proposes to drill out the top 50' of cement and set a cast iron bridge plug at 50'. Spot cement inside the 5½" casing from the bridge plug to surface.

RECEIVED
NOV 20 1993

OIL CON. DIV.
DIST 3

070 FARMINGTON, NM
56 NOV 14 0811-17

RECEIVED
BLM

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

Signed JIM HICKS

Title AGENT, TIFFANY GAS COMPANY

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

11/13/93
APPROVED
/s/ Duane W. Spencer
NOV 18 1993

DISTRICT MANAGER

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NMOCD

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SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☒ Other Previously P&A'd 6/11/93

2. Name of Operator

TIFFANY GAS COMPANY

3. Address and Telephone No.

Post Office Drawer 3307, Farmington, NM 87499 505/327-4902

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2400' FWL & 540' FSL
Section 18, T29N-R16W 5018' GL
N

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

I - 89 - IND - 58

6. If Indian, Allottee or Tribe Name

NAVAJO TRIBE

7. If Unit or CA, Agreement Designation

8. Well Name and No.

USG Sec 18 #33

9. API Well No.

30 - 045 - 21275

10. Field and Pool, or Exploratory Area

Hogback Dakota

11. County or Parish, State

San Juan County,
New Mexico

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other Repaired Casing Plug

- ☐ Change of Plans
☐ New Construction
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11/26/96 Air drilled cement out of 5½" casing from surface to 55'. Set cast iron bridge plug at 55'. Spotted 7.5 cubic feet cement from 55' to surface inside 5½" casing.

11/27/96 Visual inspection of casing after 30 days shows no seepage. Installed dry hole marker.

RECEIVED
JAN - 3 1997

OIL CON. DIV.
DIST. 3

070 FARMINGTON, NM

96 DEC 30 PM 1:35

RECEIVED
BLM

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

Signed JIM HICKS

Title Agent, Tiffany Gas Co.

(This space for Federal or State office use)

Approved by

Conditions of approval, if any:

Title

DEC 31 1996

DISTRICT MANAGER

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NMOC