Form 3160-5 (June 1990)

## UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

PORM APPROVED idget Bureau No. 1001-0135 Expires: March 31, 1993

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SUNDRY NOTICES AND REPORTS ON WELLS RECEIVED 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

6. If Indian, Allottee or Tribe Name Nava to

Change of Plans New Construction

(Note: Report results of multiple completion on Well

Completion or Recompletion Report and Log form.)

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SUBMIT IN TRIPLICATE	
1. Type of Well 019 FARMHATON,	<del>₩.M</del> .
	8. Well Name and No.
1. Hame of Operator	North Hogback 12#7
Raymond T. Duncan	9. API Well No.
3. Address and Telephone No.	
P. O. Box 420, Farmington, NM 87499 (505) 325-1821	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	Slickrock Dakota
720' FNL & 730' FEL	11. County or Parish, State
Unit A, Sec. 12, T29N, R17W	San Juan, NM
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REP	PORT, OR OTHER DATA

Non-Routine Fracturing OCT1 4 1992 Final Abundonment Notice Conversion to Injection OIL CON. DIV Dispose Water

Recompletion

TYPE OF ACTION

DIST 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.)\*

> Request permission to plug and abandon the subject wells as follows:

1.) Pull rods & tubing.

TYPE OF SUBMISSION

- 2.) Fill 43" OD, 10.80#, CW, 8V casing from T.D. 663' to surface with 51 sx class "B" neat cement.
- Install permanent dry hole monument. 3.)
- 4.) Remove existing surface equipment.
- Clean and restore location per current BLM guidelines. 5.)

ide 18 U.S.C. Section 1001, makes it a crime for any person k			APPROVED
Approved by	Tide		Date
SignedSherman R. Dugan (This space for Feeral or Side office use)	nue		Date
I. I hereby certify that the foregoing is true and correct	Tide	Agent	10/5/92

\*See Instruction on Reverse Side

NMOCD