## RECEIVED

MAY 2 4 1985

Form 9-331 Dec. 1973

BUREAU OF LAND MANAGEMENT

## Form Appreved. Budget Bureau No. 42-R1424

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DEPARTMENT OF THE INTERIOR  GEOLOGICAL SURVEY	5. LEASE 14-20-0603-9591 6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribal 7. UNIT AGREEMENT NAME 8. FARM OR LEASE 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 Form 9-331-C for such proposals.)				
1. oil gas cother	North Hogback / 9. WELL NO.			
2. NAME OF OPERATOR  Raymond T. Duncan  3. ADDRESS OF OPERATOR	10. FIELD OR WILDCAT NAME			
1777 S. Harrison St.P-1.Denver, CO 80210 4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17 below.)	11. SEC., T., R., M., OR BLK. AND SURVEY OR  AREA  NW SE Sec. 1-T29N-R17W			
AT SURFACE: 2400' FSL & 2350' FEL AT TOP PROD. INTERVAL: AT TOTAL DEPTH:	12. COUNTY OR PARISH 13. STATE San Juan New Mexico			
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	14. API NO.  15. ELEVATIONS (SHOW DF, KDB, AND WD) 4982' GR			

REQUEST FOR APPROVAL TO: TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL PULL OR ALTER CASING MULTIPLE COMPLETE CHANGE ZONES ABANDON\* (other)

SUBSEQUENT REPORT OF:

RECEIVED MAY 2 0 1985 Change on Form (1985)

MAY 31 1985

BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA

OIL CON. DIV.

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.)\*

Subject well to be P&A'd as follows:

- Pull rods and tubing.
- 2. Pump 10 sx plug down casing. Displace to bottom of hole - interval 670'-550'.
- Pump 5 sx plug interval 60' to surface.
- Dig down and cut-off casing 4' below ground level.
- 5. Weld plate on top of casing.
- Clean and restore location per BLM requirements.

Casing will be cut-off below ground level because well is in cultivated area. Work would be performed in late fall to minimize impact on crops and land. Subsurface Safety Valve: Manu. and Type Ft. 18. I hereby certify that the foregoing is true and correct SIGNED TITLE Operations Supt (This space for Federal or State office use) APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:

TOW AREA MANAGER FARMINGTON RESOURCE AREA