

Form 9-331
(May 1963)UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEYSUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)Form approved.
Budget Bureau No. 42-R1424.

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. OIL WELL <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-9591	
2. NAME OF OPERATOR Walter Duncan		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo Tribe	
3. ADDRESS OF OPERATOR Box 234, Farmington, New Mexico 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 2450' FSL -- 1520' FEL		8. FARM OR LEASE NAME North Hogback 1	
14. PERMIT NO.		9. WELL NO. 18-Y	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 4986' GR		10. FIELD AND POOL, OR WILDCAT Slickrock - Dakota	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 1, T29N, R17W	
		12. COUNTY OR PARISH San Juan	
		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"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input checked="" 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) <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.)*

2-16-75

Spudded w/Williken cable tool rig and drove 7" csg to 25'. Drilled 10' below 7" and cemented csg w/5 sx.

4-12-75

Circulated hole clean. Laid down drill pipe. Ran ES log by Go International - logger's TD 662'. Ran 22 jts 4-1/2" OD 10.5# 8R ST&C "B" condition csg. TE 674.00 set at 662' GR, cemented w/75 sx Class "A" neat, good mud returns while cementing. Max cementing press 300 psi, bumped plug w/800 psi, trace of cement to surface. Left shut in. POB 2:30 PM, 4-11-75.

4-15-75

Cut off 4-1/2" csg and welded on bell nipple. Picked up 2-3/8" OD tbg and 3-7/8" bit. Blew hole down with air, drilled plug and guide shoe, and dried up hole. Drilled 8' open hole (first 5' no show, last 3' good odor and blowing free oil from hole last 2-1/2'). Pulled bit and ran 21 jts 2-3/8" OD 4.7# 8R EUE tbg. TE 648.73 set at 647'. (Note: TD 670', open hole 662-670'.) Well was flowing to surface when tbg landed.

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

SIGNED

Thomas A. Dugan

TITLE

Engineer

DATE

4-16-75

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: