

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

I-89-IND-58

SUBJURY NOTICES AND REPORTS ON WELLS

NAVAJO Tribal

1. NAME OF OPERATOR TIFFANY GAS COMPANY		7. COUNTY AND STATE USG SECTION 19	
3. ADDRESS OF OPERATOR P.O. DRAWER 3307, Farmington, NM 87499		9. WELL NO. 50	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1450' FNL & 1600' FEL		10. FIELD AND POOL, OR WILDCAT Hogback Dakota	
14. PERMIT NO.		12. COUNTY OR PARISH San Juan	
15. ELEVATIONS (SHOW WELLSIDE, RT. OR ETC.) 5000' GR		13. STATE NM	

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	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)	☐	WATER SHUT-OFF	☐
		FRACTURE TREATMENT	☐
		SHOOTING OR ACIDIZING	☐
		(Other) Spud & 7" Surface Casing	☒

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

17. WHEN FIELD IS PULLED 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.) *

08/24/89

- 1) This well was supdded 8/24/89 @1145 hours.
- 2) An 8 3/4" hole was rotary drilled to 45' GR.
- 3) 1 joint of 7", 23# Casing was set @ 45' GR and cemented w/53.1 CF (45 sx) Class "B" Cement w/3% Ca CL. Cement Circulated. Job complete @830 hours 3/25/89.
- 4) Surface cementing was witnessed by Mark Philliber of the Farmington BLM Office.
- 5) W.O.C

I hereby certify that the foregoing is true and correct

SIGNED

JIM HICKS

(Title space for Federal or State office use)

TITLE Agent/Tiffany Gas Company

ACCEPTED FOR RECORD

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

SEP 01 1989

FARMINGTON RESOURCE AREA

BY

Smm

*See Instructions on Reverse Side