

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

(Other instructions on reverse side)

Expires August 31, 1985

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
TIFFANY GAS COMPANY

3. ADDRESS OF OPERATOR
P.O. BOX 3307, Farmington N.M. 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)
At surface
1025' FSL & 1575' FWL

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5034'

5. LEASE DESIGNATION AND SERIAL NO.
I-89-IND-58

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navao Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
USG SECTION 18

9. WELL NO.
55

10. FIELD AND POOL, OR WILDCAT
HOGBACK DAKOTA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 7, T29N, R16W

12. COUNTY OR PARISH 13. STATE
San Juan 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 ☐
 PLUG BACK TREAT ☐ MULTIPLE COMPLETION ☐
 SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
 REPAIR WELL ☐ CHANGE PLANE ☐

WATER SHUT-OFF ☐ REPAIRING WELL ☐
 FRACTURE TREATMENT ☐ ALTERING CASING ☐
 SHOOTING OR ACIDIZING ☐ ABANDONMENT* ☐
 (Other) drilling 3 3/4" open hole ☒ X
 (NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. (If well is being drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to the well.)

W.O.C. time: 17 hrs.

7/27/90 Nipped up B.O.P. to 4 1/2" casing and pressure tested to 1500 psi for 15 min. with no bleed off. Drilled 3 3/4" open hole from 706.5' GR. to 718.5' GR. Landed tubing in wellhead. Nipped down B.O.P., installed wellhead valves and hooked well up to test tank. Released rig.

API # 30-045-27944

RECEIVED

AUG 06 1990

OIL CON. DIV.
DIST. 3

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

SIGNED  JIM HICKS

TITLE Agent, Tiffany Gas Company

DATE 7/27/90

(This space for Federal or State office use)

APPROVAL BY _____
CONDITIONS OF APPROVAL IF ANY:

TITLE

ACCEPTED FOR RECORD

NMOCD

AUG 02 1990

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY 