

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 1004-0135
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
KOCH EXPLORATION CO.

3. ADDRESS OF OPERATOR
P.O. BOX 2256 WICHITA, KANSAS 67201

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1850 FWL & 1000 FWL

5. LEASE DESIGNATION AND SERIAL NO.
SF-080776-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
WILLIAM MANSFIELD

9. WELL NO.
1

10. FIELD AND POOL, OR WILDCAT
BASIN DAKOTA

11. SEC., T., S., M., OR B.L.K. AND SURVEY OR AREA
25-30 N-10 W

12. COUNTY OR PARISH
SAN JUAN

13. STATE
N.M.

14. PERMIT NO.

15. ELEVATIONS (Show whether SP, RT, GR, ETC.)
GR-6127

RECEIVED

NOV 29 1985

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

SUBSEQUENT REPORT OF:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*

THIS WELL WAS TURNED ON 11-8-85 AFTER BEING SHUT IN MORE THAN 90 DAYS

RECEIVED
DEC 06 1985
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct
SIGNED W. Elmer G. Eckhardt TITLE DIST. PROD. SUPT. DATE DEC 6 1985
(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY _____ TITLE _____ DATE DEC 9 1985
CONDITIONS OF APPROVAL, IF ANY: _____
FARMINGTON RESOURCE AREA
BY [Signature]

*See Instructions on Reverse Side