

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse 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 ☐ GAS WELL ☐ OTHER ☒ Dry

2. NAME OF OPERATOR
B. A. Dodgen

3. ADDRESS OF OPERATOR
Route 3, Box 215 Flora Vista, N. Mex. 87415

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface
1650'WL & 330'NL Section 28, T31N - R17W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
5116 Ground

5. LEASE DESIGNATION AND SERIAL NO.
N00-C-14-20-2198

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo - Tribal

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Navajo

9. WELL NO.
1-28

10. FIELD AND POOL, OR WILDCAT
Wildcat

11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA
Sec. 28, T31N - R17W

12. COUNTY OR PARISH
San Juan

13. STATE
N. Mex.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐
FRACTURE TREAT ☐
SHOOT OR ACIDIZE ☐
REPAIR WELL ☐
(Other)

PULL OR ALTER CASING ☐
MULTIPLE COMPLETE ☐
ABANDON* ☐
CHANGE PLANS ☐

WATER SHUT-OFF ☐
FRACTURE TREATMENT ☐
SHOOTING OR ACIDISING ☐
(Other)

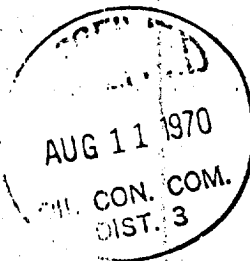
SUBSEQUENT REPORT OF:

REPAIRING WELL ☐
ALTERING CASING ☐
ABANDONMENT ☒

(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.)

Pulled surface casing.
Set cement plug 813' - 713' and five sacks at surface with dry hole marker.
Above work performed on 11/4/69.
Cleaned location.



RECEIVED

NOV 4 1969

U. S. GEOLOGICAL SURVEY
WASHINGTON

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

SIGNED B. A. Dodgen TITLE _____
B. A. Dodgen
(This space for Federal or State office use)

DATE 11/4/69

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

APPROVED

NOV 20 1969

P. T. McGRATH

DISTRICT ENGINEER

*See Instructions on Reverse Side