

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 <u>FRUITLAND COAL WELL</u>	2. NAME OF OPERATOR <u>KOCH EXPLORATION COMPANY</u>	3. ADDRESS OF OPERATOR <u>3605 N. DUSTY-FARMINGTON, NEW MEXICO 87401</u>	4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface <u>1810' ENL & 1500' FEL</u>	5. LEASE DESIGNATION AND SERIAL NO. <u>NM-013642</u>	6. IF NEUMAN, ALLOTTED OR TRUSS NAME <u>BLM</u>	7. SURFACE ELEVATION <u>NA</u>	8. NAME OF LEASEE <u>GARDNER- C</u>	9. WELL NO. <u>2</u>	10. FIELD AND POOL, OR WILDCAT <u>BASIN FRUITLAND COAL</u>	11. SEC., T., R., N., OR BLM, AND SUBSET OR AREA <u>31-T32N--R-8W</u>	12. COUNTY OR PARISH <u>SAN JUAN</u>	13. STATE <u>NM.</u>
14. PERMIT NO. <u>30-045-27983</u>	15. ELEVATIONS (Show whether OF, RT, OR, etc.) <u>GR. 6516'</u>											

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANK	☐
(Other)	☐		☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
(Other)	☐		☐

(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 NOTICE IS APPLYING FOR PERMISSION TO DOWN GRADE OUR BOP STACK TO A
2000# SYSTEM INSTEAD OF THE 3000# STACK THAT WAS ORIGINALLY APPROVED.

RECEIVED

APR 24 1991

OIL CON. DIV
DIST. 3

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

SIGNED Delores D. Eckert TITLE DIST. PROD. SUPT.

DATE 3-28-91

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

APPROVED

APR 11 1991

AREA MANAGER

*See Instructions on Reverse Side