

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No.

P.O. Box 215, Cortez, CO 81321 303-565-2458

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2230' FEL + 750' FNL, Sec. 34, T32N R17W

5. Lease Designation and Serial No.
14-20-603-5013

6. If Indian, Allottee or Tribe Name

NAVAJO

7. If Unit or CA, Agreement Designation

8. Well Name and No.

NAVAJO M # 7

9. API Well No.

30045112060051

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

SAN JUAN, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other

- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

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

13. 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.)

Plan to continue T.A. status.

RECEIVED

APR 9 1993

**OIL CON. DIV.
DIST. 3**

APR 01 1994

THIS APPROVAL EXPIRES

RECEIVED
BLM
APR 30 2011:37
GEO. ENGINEERING, NM

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

Signed Pete W. [Signature]

Title

Date 3/29/93

(This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title

**APPROVED
AS AMENDED**

APR 05 1993

DISTRICT MANAGER

*See Instruction on Reverse Side

DNCC

APPROVED
AS AMENDED

DISTRICT MANAGER