

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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 WSW

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)
640' FNL & 690' FEL, ^A Sec. 28 T32N R17W

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

5. Lease Designation and Serial No.
14-20-603-5012

6. If Indian, Allottee or Tribe Name
Navajo

7. If Unit or CA, Agreement Designation

8. Well Name and No.
1

9. API Well No.
300451130100S1

10. Field and Pool, or Exploratory Area
Many Rocks Gallup

11. County or Parish, State
San Juan, New Mexico

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

3. 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 long term shut-in due to economic conditions.

RECEIVED
NOV 12 1992

ON 11/11/92

THIS APPROVAL EXPIRES SEP 01 1993

RECEIVED
BLM
OCT 30 PM 1:19
010 FIELD SECTION, R.M.

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

Signed Pat Woolley Title Operator Date 10/15/92

(This space for Federal or State office use)

Approved by _____ Title _____ Date NOV 06 1992

Conditions of approval, if any:

APPROVED

AREA MANAGER

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

*See Instruction on Reverse Side

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