Form 9-331
(May 1963)

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN (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 P & A

2. NAME OF OPERATOR: Claude C. Kennedy

3. ADDRESS OF OPERATOR: 1249 Chaco Ave., Farmington, New Mexico 87401

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 2280'fwl, 380'fsl

30-045-11846

5. LEASE DESIGNATION AND SERIAL NO.: 14-20-603-2027

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

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Deb

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: Wildcat

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 13, 30N, 17W

12. COUNTY OR PARISH: San Juan

13. STATE: New Mex.

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 5031 Gr

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

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐	WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐	FRACTURE TREATMENT	☐	ALTERING CASING	☐
SHOOT OR ACIDIZE	☐	ABANDON*	X	SHOOTING OR ACIDIZING	☐	ABANDONMENT*	☐
REPAIR WELL	☐	CHANGE PLANS	☐	(Other)			
(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.) *

Plug Dakota 500-776

Plug Gallup Surface - 350

RECEIVED
APR 17 1967
U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

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

SIGNED Original Signed by: CLAUDE C. KENNEDY TITLE Operator DATE 12-16-1966

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
DEC 16 1966
JOHN L. WARD
ACTING DISTRICT ENGINEER

*See Instructions on Reverse Side