

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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FORM APPROVED

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

5. Lease Designation and Serial No.
NM -109407

6. If Indian, Allottee or Tribe Name

150 Farmington, NM

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Federal Strat Test C-1C

9. API Well No.

30-045-31588

10. Field and Pool, or Exploratory Area

Mancos

11. County or Parish, State

San Juan Co., NM

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

Northstar Oil and Gas Corp.

3. Address and Telephone No.

P.O. Box 93, Farmington, NM 87499 (505) 327-5751

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

**1214' FNL & 1478' FEL
Section 35, T24N, R11W NMPM**

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 **Operations Report**

☐ 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 vertic

1/3/04 - Depth is 1891'. Operation is sidetracking around unrecovered drill pipe.



FD-302 (REV. 10-1-95)

JAN 29 2004

WATER FIELD OFFICE

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

Signed

John C. Carter

Title

President

Date

January 13, 2004

(This space for Federal or State office use)

Approved by

Title

Date

Conditions of approval, if any:

NMOC