

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

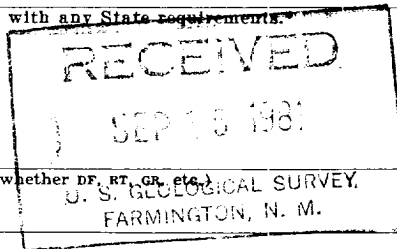
SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM 15843 A	
2. NAME OF OPERATOR DAKOTA RESOURCES, INC.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR c/o Walsh Engineering & Prod. Corp. P. O. Box 254 Farmington, N.M. 87401		7. UNIT AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 660'FNL, 660'FEL		8. FARM OR LEASE NAME Jeffery Federal 30	
14. PERMIT NO.		9. WELL NO. 41	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6988'G.L.		10. FIELD AND POOL, OR WILDCAT Undesignated	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 30-T17N-R9W N.M.P.M.		12. COUNTY OR PARISH McKinley	
13. STATE N.M.			



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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input checked="" type="checkbox"/>
(Other) <input type="checkbox"/>	

SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) <input type="checkbox"/>	

(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.)*

The following items are changes from previously indicated on Application For Permit to Drill, Approved September 2, 1981.

Casing:

From 5-1/2", 10.50, at 2800', 370 sacks - to surface.
TO: 4-1/2", 11.60, at 2800', 500 sacks - to surface.

Exhibit "B" Item 8 (a) & (c):

From: (a) None
(c) None

TO: (a) Possible DST In Dakota Formation
(c) Core Hospah, 1375' to 1485' (estimated)



FOR: DAKOTA RESOURCES, INC.

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

SIGNED EWELL N. WALSH, P.E. TITLE President, Walsh Engr. & Production Corp. DATE 9/14/81

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

NMOCC

