

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. N00-C-14-20-5531
2. NAME OF OPERATOR James L. Ludwick		6. IF INDIAN, ALLOTTEE OR TRIBE NAME NAVAJO ALLOTTED
3. ADDRESS OF OPERATOR P.O. Box 70, Farmington, NM 87499		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 490' FNL, 425' FEL		8. FARM OR LEASE NAME INDIAN 18
14. PERMIT NO.		9. WELL NO. 18-2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6640 FR		10. FIELD AND POOL, OR WILDCAT WILDCAT Papers Wash
		11. SEC., T., R., M., OR BLM. AND SURVEY OR AREA Sec. 18, T19N, R5W
		12. COUNTY OR PARISH McKinley
		13. STATE NM

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	<input type="checkbox"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input checked="" type="checkbox"/>	ALTERING CASING	<input checked="" type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANS	<input type="checkbox"/>		<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 to all markers and zones pertinent to this work.)\*

REQUEST TO PLUG & ABANDON:

PLANS FOR PLUGGING WELL 18-2:

1. Tie on to 4 1/2" casing, load hole with water, break down perfs.
2. Pump 105 sks neat cement, 6% gel yield 1.73, squeeze 5 sks cement into perfs.
3. Perfs at 1876-78-80-82-84-86-88-90-92-94-96-98-1900-02-04-1914-14-15-16-17-18.
4. Install dry hole marker, back fillpits and reseed location.
5. Work to be completed by June 31, 1993.

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

SIGNED James L. Ludwick TITLE Operator DATE 1/19/93

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_ DATE \_\_\_\_\_

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

JAN 26 1993

AREA MANAGER

\*See Instructions on Reverse Side

NMOCD