

(November 1983)
(Form 17-9-331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NM-8005
2. NAME OF OPERATOR BCO, Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR 135 Grant, Santa Fe, New Mexico 87501	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 1980 FSL - 1650 FEL Sec 1 T23N R9W NMMP	8. FARM OR LEASE NAME Federal D
14. PERMIT NO.	9. WELL NO. 2
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 6892	10. FIELD AND POOL, OR WILDCAT Nageezi Gallup
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 1, T23N, R9W NMMP
	12. COUNTY OR PARISH San Juan
	13. STATE NM

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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) Temporary Abandonment <input checked="" 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.)*

6/29/92

BCO, Inc. requests a one year extension to shut-in approval for subject well. Plunger lift operations on this well are labor intensive and a stabilized oil price of \$25.00/barrel or greater is required to justify operations.

Mechanical Integrity Test - Plan to verify protection of fresh water zones by shooting a fluid level using a sonolog. If fluid level is below lowest protectable fresh water (Ojo Alamo) then no pressure test will be performed.

RECEIVED
JUL 20 1992
OIL CON. DIV. I
DIST. 3

THIS APPROVAL EXPIRES JUL 01 1993

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

SIGNED _____ TITLE Petroleum Engineer

(This space for Federal or State office use)

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

DATE 6/29/92

APPROVED
AS AMENDED

DATE JUL 15 1992

AREA MANAGER

REQUEST DENIED - MIT WILL NEED

TO BE MADE BY BLM/BLM

SEE INSTRUCTIONS ON REVERSE SIDE