

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

5. LEASE DESIGNATION AND SERIAL NO.

NM 23038

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Native Son

9. WELL NO.

3

10. FIELD AND POOL, OR WILDCAT

Gavilan Mancos/Gavilan Dakot

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec.33, T25N, R2W, NMPM

12. COUNTY OR PARISH

13. STATE

Rio Arriba

NM

1.

OIL WELL ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR

Jerome P. McHugh & Assoc.

3. ADDRESS OF OPERATOR

P O Box 208, Farmington, NM 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)

At surface
1850' FSL - 790' FEL

RECEIVED

JAN 22 1985

BUREAU OF LAND MANAGEMENT

14. PERMIT NO.

15. ELEVATIONS (Show whether of top of casing or resource area)

7233' GL; 7245' RKB

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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☐
☐

PULL OR ALTER CASING

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☐
☐
☐
☐

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

☐
☐
☐

REPAIRING WELL

☐
☐
☐

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

ABANDONMENT*

(Other) Spud & Surface Casing

☒

(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).*

M.I. & R.U. Four Corners Drilling Company rig #2. Spudded 12 1/4" hole at 2:30 PM on 1-17-85. Drilled to 245'. Ran 5 jts. of 9-5/8" OD, 36#, 8 Rd, ST&C casing (T.E. 225') set at 237' RKB. Cemented with 125 sks class "B" plus 2% CaCl (147 cf). P.O.B. at 8:00 PM 1-17-85. (Circulated 3 bbls cement.)

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

SIGNED

Jim L. Jacobs

TITLE Geologist

DATE 1-18-85

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

ACCEPTED FOR RECORD

FEB 01 1985

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY