## UNITED STATES SUBMIT IN TRIPLICATES DEPARTMENT OF THE INTERIOR (Other Instructions on reverse side)

Form approved, Budget Burgar No. 42 R1424. 5. LEASE DESIGNATION AND BERIAL NO.

	SF 078302-A	SF 078302-A			
SUNDRY (Do not use this form for Use "A	6. IF INDIAN, ALLOTTER	OR TRIBE NAME			
1.			7. UNIT AGREEMENT NA	7. UNIT AGREEMENT NAME	
WELL X WELL OTHER			East Bisti	East Bisti Unit	
2. NAME OF OPERATOR			8. FARM OR LEASE NAM	(E	
Skelly Oil Compar 3. ADDRESS OF OPERATOR	ny	•			
			9. WELL NO.		
1860 Lincoln Street, Denver, Colorado 80203  4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			109 10. FIELD AND POOL, O	10. FIELD AND POOL, OR WILDCAT	
See also space 17 below.) At surface  1930  660' FNL & 1980' FEL Section 7-24N-9W				Bisti Lower Gallup	
			11. SEC., T., R., M., OR B	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA	
			SUBVET OR AREA	SUBVET OR ARDA	
			Section 7-24N-9W		
14. PERMIT NO.	15. ELEVATIONS (Show wheth		12. COUNTY OR PARISH	1	
	68291 KB 68	316' GR	San Juan	New Mexico	
<sup>16.</sup> Che	ck Appropriate Box To Indica	ate Nature of Notice, Report, o	r Other Data		
NOTICE O	F INTENTION TO:	SUBS	SEQUENT REPORT OF:		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING V	XXII.	
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CA	i—-	
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMEN		
REPAIR WELL	REPAIR WELL CHANGE PLANS (Other)				
(Other)		(NOTE: Report resi	ults of multiple completion ompletion Report and Log for	on Well	
Plans are to plug  First Plug - 1  Second Plug - 1  Third Plug - 1  Fourth Plug -	g and abandon this we 100' plug across the ( 50' inside of 5-1/2" 150' cement plug exter section across the Pic 100' plug at bottom of through the Ojo Alamo	of Ojo Alamo Sand (unle	s: 3-5466' where casing is sove the Fruitland ess surface casin	hot in two	
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18. I hereby certify that the fore	and a few and a few				
SIGNED SIGNED	going is true and correct	Dist. Operations Supt	DATE June	8, 1971	
(This space for Federal or S	tate office use)				
APPROVED BYCONDITIONS OF APPROVA	L, IF ANY:		DATE	<del></del>	