

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

5. LEASE DESIGNATION AND SERIAL NO.

SF-078673

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR R & G DRILLING COMPANY	8. FARM OR LEASE NAME Schlosser
3. ADDRESS OF OPERATOR c/o Walsh Engr. & Prod. Corp. P. O. Drawer 419 Farmington, New Mexico 87499	9. WELL NO. 25
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850'FSL, 1850'FEL	10. FIELD AND POOL, OR WILDCAT Kutz Fruitland
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 27-T28N-R11W N.M.P.M.
15. ELEVATIONS (Show whether OF, RT, CR, etc.) 5617'D.F.	12. COUNTY OR PARISH 13. STATE San Juan N.M.

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"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Repair Casing	X

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)	

(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.)*

It is proposed to repair the 5-1/2" production casing to shut off water entering the casing.

The Pictured Cliffs perforations will be plugged and abandoned ^{done} after repairing of the casing.

A small pit will be constructed to contain water and cement utilized during the repair of the casing. The pit will be constructed within the perimeter of the disturbed area associated with the original drilling of the well.

RECEIVED

FEB 05 1990

OIL CON. DIV.
DIST. 3

FOR: R & G DRILLING COMPANY

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

SIGNED EWELL N. WALSH TITLE Agent
Ewell N. Walsh
(This space for Federal or State office use)

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

MAILED

*See Instructions on Reverse Side

APPROVED
DATE 1/12/90
JAN 23 1990
DATE Ken Townsend
AREA MANAGER
FARMINGTON RESOURCE AREA