

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
GEOLOGICAL SURVEY

PERMIT OR TRIPPLICATE\*  
(Other Instructions on re-  
verse side)

5. LEASE DESIGNATION AND SERIAL NO.

14-20-0603-9591

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo Tribe

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

North Hogback 1

9. WELL NO.

23

10. FIELD AND POOL, OR WILDCAT

Slickrock Dakota

11. SEC. T. R. ME. OR BLK. AND  
SURVEY OR AREA

Sec 17, T29N, R17W

12. COUNTY OR PARISH

San Juan

13. STATE

NM

1. OIL WELL ☐ GAS WELL ☐ OTHER ☒ Dry Hole

2. NAME OF OPERATOR

Walter Duncan

3. ADDRESS OF OPERATOR

Box 234, Farmington, NM 87401

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

1600' FNL - 2200' FWL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

4978' GR

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) ☐

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON\* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT\* ☒

(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.)\*

This well was plugged and abandoned in the following manner 10-29-76

1. Spotted 20-sk cement plug TD to 600'
2. Spotted 15-sk cement plug 100' to 16'
3. Cut off 7" csg below plow depth
4. Clean up location and abandon well.



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

SIGNED

Jim L. Jacobs

TITLE

Agent

DATE

11-3-76

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY: