

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE\*  
(Other Instructions on re-  
verse side)

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. <input type="checkbox"/> OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER	
2. NAME OF OPERATOR Navajo Tribal Utility Authority	
3. ADDRESS OF OPERATOR P.O. Box 170 - Fort Defiance, AZ. 86504	
4. LOCATION OF WELL (Report location clearly and in accordance with BLM Form 1000-2, Rev. 1-83. See also space 17 below.) At surface Unit B, 735' FNL & 1360' FEL	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, ST, GR, etc.) 4960' GR

5. LEASE DESIGNATION AND SERIAL NO. 14-20-0603-8492	
6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
7. UNIT AGREEMENT NAME	
8. FARM OR LEASE NAME Navajo	
9. WELL NO. B #1	
10. FIELD AND POOL, OR WILDCAT Undesignated	
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 14, T30N, R18W	
12. COUNTY OR PARISH San Juan	13. STATE NM

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"/>	WATER SHUT-OFF	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	FRACTURE TREATMENT	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	SHOOTING OR ACIDIZING	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	(Other)	<input type="checkbox"/>
(Other)	<input type="checkbox"/>	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	<input type="checkbox"/>
PULL OR ALTER CASING	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
MULTIPLE COMPLETE	<input type="checkbox"/>	ALTERING CASING	<input checked="" type="checkbox"/>
ABANDON*	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
CHANGE PLANE	<input type="checkbox"/>		

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.)\*

REFERENCE: 3162.3-4(016)

The well bore was plugged in the following manner.

- 8-21-85 °Cement retainer was set @5650'.  
°Squeeze cemented w/150 sx of class B. Displaced 50 sx into perforations @6489-6502', left 95 sx in 5 1/2" casing from 5650' to 6502'. Final squeeze pressure was 3000 PSI. Pulled out of retainer and spotted 5 sx on top of retainer.
- 8-22-85 °Pulled tubing out of hole and perforated two squeeze holes @2950'.  
°Ran tubing with cement retainer & set @2850'.  
°Squeeze cemented w/65 sx of class B. Displaced 50 sx into perforations @2950', left 11 sx in 5 1/2" casing from 2850-2950'. Final squeeze pressure was 2000 PSI. Pulled out of retainer and spotted 4 sx on top of retainer.  
°Pulled tubing up to 1235' and spotted 35 sx class B cement from 935-1235' in 5 1/2" casing.  
°Pulled tubing out of hole laying down.  
°Perforated 2 squeeze holes @184'.  
°Pumped water down 5 1/2" casing & established circulation back to surface through 8 5/8" intermediate casing. Cemented w/60 sx of class B cement back to surface.  
°Nippled down wellhead and erected dry hole marker.

(Request approval as to plugging of the well bore, liability under bond will be retained until surface restoration is completed.)

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

SIGNED Jim Hicks  
(This space for Federal or State office use)

Engineer  
TITLE Hicks Oil & Gas, Inc.

DATE August 26th, 1985

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

TITLE \_\_\_\_\_

DATE \_\_\_\_\_

ACCEPTED FOR RECORD

SEP 03 1985

AUG 29 1985

\*See Instructions on Reverse Side

BY Sm