UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.)

5. LEASE DESIGNATION: NM 024907
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:
8. FARM OR LEASE NAME: Barker Dome Com.
9. WELL NO.: 1
10. FIELD AND POOL, OR WILDCAT: Basin Dakota
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: SEC.23, T31N, R13W, NMPM
12. COUNTY OR PARISH: San Juan
13. STATE: NM

1. OIL WELL / GAS WELL X / OTHER
2. NAME OF OPERATOR: Ladd Petroleum Corp.
3. ADDRESS OF OPERATOR: 3535E. 30th Suite 224A Farmington, N. M. 87401
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1190' FNL -790' FEL
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.): 5795' GL

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	
(Other) X		(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 has been approved for long term shut-in. Gas Co. of N. M. did produce well in June for 6 days and again in July for 4 days. The well has not produced since then . WE still plan on keeping well shut-in.

RECEIVED
JAN 10 1990
OIL CON. DIV.
DIST. 3

THIS APPROVAL EXPIRES JAN 08 1991

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

SIGNED [signature] TITLE Field Supt. DATE 10-19-89

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JAN 08 1990

CONDITIONS OF APPROVAL, IF ANY:

APPROVED
FOR AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.