Form 9-331
(May 1963)

UNITED STATES DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Form approved. Budget Bureau No. 42 R1424.

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 [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR
B.O.A. Oil& Gas Co.

3. ADDRESS OF OPERATOR
3530 E. 30th Street Suite 10?, Farmington, NM

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

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
5,1??

5. LEASE DESIGNATION AND SERIAL NO.
??-604-90

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
?? Mountian

7. UNIT AGREEMENT NAME
Mountain

8. FARM OR LEASE NAME
[illegible]

9. WELL NO.
[illegible]

10. FIELD AND POOL, OR WILDCAT
[illegible] Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
[illegible]-15W-NMPM

12. COUNTY OR PARISH
San Juan

13. STATE
New Mexico

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) Complete Well			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.)*

Will Tail?? ?el? ?? ?r?h ?, 198?

ILLEGIBLE

ACCEPTED FOR RECORD

?? 20 80

Durango DISTRICT

BY GLB

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

SIGNED Ralph [signature] TITLE Operator DATE Nov 17, 1980

(This space for Federal or State office use)

APPROVED BY ______ TITLE ______ DATE ______
CONDITIONS OF APPROVAL, IF ANY:

State

*See Instructions on Reverse Side