

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.

5. Lease Designation and Serial No.

M70-721-88-001

6. If Indian, Allottee or Tribe Name

Zuni

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Zuni Tribal 1-Y

9. API Well No.

10. Field and Pool, or Exploratory Area

Wildcat

11. County or Parish, State

Cibola, NM

SUBMIT IN TRIPLICATE

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Fossil Fuels Inc.

3. Address and Telephone No.

PO Box 479, Dallas, TX 75221-0479 214/969-5555

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1373' from west line and 2453' from south line of Section 4,
Township 8 North, Range 18 West

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☐ Subsequent Report
☒ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☐ Other
- ☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)*

As reported on form 3160-5 dated 9/12/89, well was turned over to Zuni Tribe for completion as a water well. Well retention decision by Tom Couch, USGS, Albuquerque.

Seeding has been completed as of August, 1993.

Please see copies of forms filed 9/12/89.

RECEIVED
NOV - 9 1994
OIL CON. DIV.
DIST. 3

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

Signed Donna Barce

Title Production Secretary

Date 10/10/94

(This space for Federal or State office use)

Approved by Patricia M Hester

Title for Chief, Lands and Mineral Resources

Date NOV 8 1994

Conditions of approval, if any:

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.

*See Instruction on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-1
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. OIL WELL ☒ GAS WELL ☐ OTHER ☐	3. LEASE DESIGNATION AND SERIAL NO. M70-721-88-001
2. NAME OF OPERATOR Fossil Fuels Inc.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME Zuni
3. ADDRESS OF OPERATOR P.O. Box 479, Dallas, TX 75221-0479	7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1373' from west line and 2453' from south line of Section 4.	8. FARM OR LEASE NAME Zuni Tribal
14. PERMIT NO.	9. WELL NO. 1-Y
15. ELEVATIONS (Show whether DF, RT, GR, etc.) GR 7345'	10. FIELD AND POOL, OR WILDCAT Wildcat
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 4, T8N, R18W
	12. COUNTY OR PARISH Cibola
	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 ☐

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) ☐

(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.)*

Well has been turned over to the Zuni Tribe for completion as a water well.
Well retention decision by Tom Couch, USGS, Albuquerque, NM.
Cement plugs were set as follows: on August 20, 1989:

Bottom: 1954-1754' - 60 sx - 70.8 cu. ft.
Intermediate: 1624-1424' - 60 sx - 70.8 cu. ft.

Tagged intermediate plug & found top at 1593', so additional plug was set:
Intermediate: 1565-1500' - 15 sx - 17.7 cu. ft. Tagged top of third plug @ 1500'.

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

SIGNED Dana Rocco

TITLE Production Secretary

DATE 09/12/89

(This space for Federal or State office use)

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN DUPLICATE*

(See other in-
structions on
reverse side)

Form approved.
Budget Bureau No. 1004-0137
Expires August 31, 1985

WELL COMPLETION OR RECOMPLETION REPORT AND LOG *

1a. TYPE OF WELL: OIL WELL ☐ GAS WELL ☐ DRY ☒ Other _____

b. TYPE OF COMPLETION:
NEW WELL ☐ WORK OVER ☐ DEEP EN ☐ PLUG BACK ☐ DIFF. RENVR. ☐ Other _____

2. NAME OF OPERATOR

Fossil Fuels Inc.

3. ADDRESS OF OPERATOR

P.O. Box 479, Dallas, TX 75221-0479

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements)*

At surface
1373' FWL & 2453' FSL of Section 4.

At top prod. interval reported below

At total depth

14. PERMIT NO.

DATE ISSUED

15. DATE SPUDDED

08/13/89

16. DATE T.D. REACHED

08/17/89

17. DATE COMPL. (Ready to prod.)

P&A 08/18/89

18. ELEVATIONS (DF, RKB, RT, GR, ETC.)*

GR 7345', KB 7359'

19. ELEV. CASINGHEAD

20. TOTAL DEPTH, MD & TVD

2258'

21. PLUG, BACK T.D., MD & TVD

22. IF MULTIPLE COMPL.,
HOW MANY*

23. INTERVALS
DRILLED BY

ROTARY TOOLS

All

CABLE TOOLS

24. PRODUCING INTERVAL(S). OF THIS COMPLETION—TOP, BOTTOM, NAME (MD AND TVD)*

None

25. WAS DIRECTIONAL
SURVEY MADE

No

26. TYPE ELECTRIC AND OTHER LOGS RUN

Density and induction

27. WAS WELL CORED

No

28. CASING RECORD (Report all strings set in well)

CASING SIZE	WEIGHT, LB./FT.	DEPTH SET (MD)	HOLE SIZE	CEMENTING RECORD	AMOUNT PULLED
13-3/8"	54.5	182'	17"	225 sx Cl B, 2% CaCl ₂ & 1/4#/sk Celloseal (265 cu. ft.)	None
8-5/8"	24.0	1565'	12-1/4"	385 sx Pozmix (825 cu. ft.) 100 sx Cl B (118 cu. ft.)	None

29. LINER RECORD

SIZE	TOP (MD)	BOTTOM (MD)	SACKS CEMENT*	SCREEN (MD)	SIZE	DEPTH SET (MD)	PACKER SET (MD)
None					None		

31. PERFORATION RECORD (Interval, size and number)

None

32. ACID, SHOT, FRACTURE, CEMENT SQUEEZE, ETC.

DEPTH INTERVAL (MD)	AMOUNT AND KIND OF MATERIAL USED
None	

33. PRODUCTION

DATE FIRST PRODUCTION		PRODUCTION METHOD (Flowing, gas lift, pumping—size and type of pump)				WELL STATUS (Producing or shut-in)	
n/a						P&A	
DATE OF TEST	HOURS TESTED	CHOKE SIZE	PROD'N. FOR TEST PERIOD	OIL—BBL.	GAS—MCF.	WATER—BBL.	GAS-OIL RATIO
n/a							
FLOW. TUBING PRESS.	CASING PRESSURE	CALCULATED 24-HOUR RATE	OIL—BBL.	GAS—MCF.	WATER—BBL.	OIL GRAVITY-API (CORR.)	

34. DISPOSITION OF GAS (Sold, used for fuel, vented, etc.)

None

TEST WITNESSED BY

35. LIST OF ATTACHMENTS

None

36. I hereby certify that the foregoing and attached information is complete and correct as determined from all available records

SIGNED Dana Higgs TITLE Production Secretary DATE 09/12/89

*(See Instructions and Spaces for Additional Data 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.

37. SUMMARY OF POROUS ZONES: (Show all important zones of porosity and contents thereof; cored intervals; and all drill-stem, tests, including depth interval tested, cushion used, time tool open, flowing and shut-in pressures, and recoveries):

FORMATION	TOP	BOTTOM	DESCRIPTION, CONTENTS, ETC.	NAME	TOP	
					MEAS. DEPTH	TRUE VERT. DEPTH
Chinle	552		Shale w/ enterbedded swelling clays			
Sonsela SS	1244	1309	Water-bearing sandstone			
Shinarump	1484	1513	Sandstone			
Moenkopi	1513	1532	Red-grey shale.			
San Andres	1577	1588	Dolomitic/Limestone - waterbearing			
Glorieta	1594	1652	Dolomite cemented sandstone - waterbearing			
Yeso	1669	2120	Interbedded; shales, sandstones & carbonates			
Abo	2120	2258	Sandstone interbedded w/ variagated shales.			

38. GEOLOGIC MARKERS