

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NOO-14-20-5528
2. NAME OF OPERATOR James L. Ludwick		6. IF INDIAN, ALLOTTEE OR TRIBE NAME NAVAJO ALLOTTED
3. ADDRESS OF OPERATOR P.O. Box 70, Farmington, NM 87499		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 1650' FNL, 530' FWL		8. FARM OR LEASE NAME INDIAN 17
14. PERMIT NO.		9. WELL NO. 3-0
15. ELEVATIONS (Show whether DF, RT, OR, etc.) 6640		10. FIELD AND POOL, OR WILDCAT UNDESIGNATED Paper Wash
		11. SEC., T., R., M., OR B.L. AND SURVEY OR AREA Sec. 17, T19N, R5W
		12. COUNTY OR PARISH 18. STATE McKinley 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"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input checked="" type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

REQUEST TO PLUG & ABANDON:

PLANS FOR PLUGGING WELL #3-17:

1. Pull rods & tubing
2. Load hole with water, break down perfs, fill 4 1/2 " casing with 106 sks. neat cement 6% gel. Squeeze 5 sks. cement into perfs.
3. Perfs at 1864,1869-72, 1876-78,1883-85,1890-92,1933,1937, 1940-43, 1949, 1954-56,1960,1963-64,1969.
4. Install dry hole marker, back fill pits, reseed location.
5. Work to be completed by June 31, 1993.

RECEIVED

JAN 28 1993

OIL CON. DIV.
DIST. 3

FARMINGTON, NM
JAN 20 AM 11:36
BLM

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

SIGNED James L. Ludwick TITLE Operator DATE 1/19/93

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

APPROVED

JAN 26 1993

AREA MANAGER

*See Instructions on Reverse Side

NMCCD