

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. N00-14-20-5528
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 / 7
14. PERMIT NO.		9. WELL NO. 3
15. ELEVATIONS (Show whether OF, NT, OR, etc.) 6640 GR		10. FENCE AND POOL, OR WILDCAT Undesignated
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 17, T19N, R5W
		12. COUNTY OR PARISH McKinley
		13. STATE NM

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDISE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANE	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input checked="" 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 work, including dates, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give bearing, azimuth and measured and true vertical depths for all markers and zones pertinent to this work.)*

RECEIVED
MAY 18 1993

PLUGGED WELL 3-17

DATE OF WORK 4/20/93

OIL CON. DIV.
DIST. 3

1. Loaded hole with water, broke down perfs, filled 4 1/2" casing with 106 sks. neat cement 6% gel. Squeezed 5 sks. cement into perfs.
2. Waited 3 hrs. pulled swedge, mixed 25 sks. neat cement, filled casing with cement.
3. back filled pits.
4. will install dry hole markers and reseed as soon as possible

RECEIVED
BLM
93 MAY 12 AM 11:33
070-FARMINGTON, NM

Approved as to plugging of the well by
Liability under bond is retained until
surface restoration is completed.

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

SIGNED James L. Ludwick

TITLE Operator

DATE 5/6/93

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY:

TITLE

APPROVED

*See Instructions on Reverse Side

APPROVED
MAY 14 1993
DISTRICT MANAGER