

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse 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. NM 6682	
2. NAME OF OPERATOR BCO, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 135 Grant Avenue, Santa Fe, New Mexico 87501		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 1830' FNL 1840' FEL Sec. 34 T23N R7W		8. FARM OR LEASE NAME Federal B	
14. PERMIT NO.		9. WELL NO. 2	
15. ELEVATIONS (Show whether DF, NT, GR, etc.) GR 6936		10. FIELD AND POOL, OR WILDCAT Alamito Gallup	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 34 T23N R7W	
		12. COUNTY OR PARISH Sandoval	
		13. STATE NM	

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETE

ABANDON*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

(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.)*

12/5/89 On November 22, 1989 cut casing at 330', ran new casing and hooked onto casing in hole with bowen casing patch. Have determined casing bowl did not connect properly. Received verbal permission from Ken Howell of the BLM to set a casing patch from 325'-335'.

RECEIVED

MAR 01 1990

OIL CON. DIV.
DIST. 3

FEB 22 1990

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

SIGNED Elizabeth B. Keeshan TITLE Vice President

DATE 12/5/89

(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

DATE _____

*See Instructions on Reverse Side