

DEPARTMENT OF THE INTERIOR (verse side)  
BUREAU OF LAND MANAGEMENT

**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, 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  2200' FSL - 2090' FEL		8. FARM OR LEASE NAME FEDERAL B
14. PERMIT NO.	15. ELEVATIONS (Show whether OF, RT, GR, etc.) GL: 7222'	9. WELL NO. 11
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data		10. FIELD AND POOL, OR WILDCAT LYBROOK GALLUP
NOTICE OF INTENTION TO:		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA NW/4 SE/4 SEC 22 T23N R7W NMP
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 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 type="checkbox"/> REPAIR WELL <input type="checkbox"/> CHANGE PLANS <input type="checkbox"/> (Other) <u>Report burying of lines</u> <input checked="" type="checkbox"/>		12. COUNTY OR PARISH SANDOVAL
		13. STATE NEW MEXICO

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.)

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

Received permission from Bureau of Land Management to use temporary surface flow lines for one year.

I hereby report that lines have been buried in accordance with original requirements of APD.

**RECEIVED**  
JUN 7 1993  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM  
93 MAY 24 AM 11:12  
070 FARMINGTON, NM

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

SIGNED Elizabeth B. Keeshan TITLE President DATE 5/21/93

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

ACCEPTED FOR RECORD  
DATE \_\_\_\_\_

JUN 2 1993

\*See Instructions on Reverse Side

FARMINGTON DISTRICT OFFICE

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.

NMOCD