

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

9 copies  
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 -014021-B	
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 780 FNL 660 FWL 22-24N-7W NMPM		8. FARM OR LEASE NAME Stephenson 1-22	
14. PERMIT NO.		9. WELL NO. 1	
15. ELEVATIONS (Show whether OF, BT, GR, etc.) 7140 GR		10. FIELD AND POOL, OR WILDCAT Escrito Gallup	
		11. SEC. T., R., M., OR BLK. AND SURVEY OR AREA 22-24N-7W NMPM	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE New Mexico	

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 ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input checked="" type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<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.)

- July 20, 1987 Put 5 bbls diesel down tubing, 5 down casing. Tagged bottom at 6031 KB. Came out of hole with 2-3/8" (5986 strapped pipe). Round tripped to bottom with casing scraper.
- July 21, 1987 Tripped in well with 2-7/8" tubing and Baker straddle packer with 4 joints, 2-3/8" between them. 1 joint 2-3/8" above. Set straddle packer 5893-5771. Filled annulus with 65 bbls crude oil. Held 500 pounds pressure 20 minutes.
- July 22, 1987 Treated 34,000 gallons of water with 170 gallons TRI-S, 69 gallons of 3N, 5900 lbs of KCL, 34 gallons of LP5S scale check, 700 lbs of WG-11, 100 lbs of HYG-3, 100 lbs of K-34 and 5 lbs GBW-30. Sand water foam fracked 5972'-6004' with 101,500 gallons of 70 quality foam, 140,000 lbs 20-40 sand, and 1,862,877 standard cubic feet of Nitrogen. Average treating pressure 5200 lbs at 20 foam bbls per minute. ISIP 2400, 5 min. 2290, 10 min. 2250, 15 min. 2220. Shut in well three hours before allowing to flow back.
- July 23, 1987 Flowed well overnight to frac tank. Released packer and swabbed well. Tripped out of hole laying down 2-7/8" tubing. Tripped in hole with 2-3/8" tubing. Tagged sand 6005'. Landed well 5973'. Pressured up back side to 650 lbs with Nitrogen. Swabbed well. Placed well back in production to clean up.

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

SIGNED Elizabeth B. Keeshan

TITLE Vice President

ACCEPTED FOR RECORD 1987

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

AUG 06 1987

AUG 04 1987

FARMINGTON RESOURCE AREA

OIL CON. DIV.

BY

\*See Instructions on Reverse

DIST. 3