STATE OF NEW MEXICO ENERGY AND MINERALS DEPARTMENT

DISTRIBUTION		
SANTA FE		
PILE		
U.S.G.S.		
LAND OFFICE	Π	
OPERATOR		

State OPERATOR State	
U.S.G.S. LAND OFFICE OPERATOR 5a. Indic State 5. State	Revised 10-1-78
LAND OFFICE OPERATOR 5, Signs	ate Type of Lease
te	F•• 🗌
	Oil & Gas Lease No.
	2986
SUNDRY NOTICES AND REPORTS ON WELLS	
USE "APPLICATION FOR PERMIT -" IFORM C-1011 FOR BUCH PROPOSALS.)	
OIL VV 6AS	Agreement Name
	NE or Lease Name
KENAI OIL AND GAS INC.	MEXICO STATE
ddress of Operator 9, Well 1	
717 17th Street, Ste. 2000, Denver, CO 80202 #2	
1	a and Pool, or Wildcat
UNIT LETTER M 950 PEET PROM THE South LINE AND 980 PEET PROM Nage	ezi-Gallup
West 32 24N 8N	
THE West LINE, SECTION 32 TOWNSHIP 24N RANGE 8W NMPM.	
15. Elevation (Show whether DF, RT, GR, etc.) 12. Coun	
6945' GL San Je	
Check Appropriate Box To Indicate Nature of Notice, Report or Other Data	
NOTICE OF INTENTION TO: SUBSEQUENT REPORT	
FORM REMEDIAL WORK	ALTERING CASING
PORABILY ABANDON COMMENCE DRILLING OPHS.	PLUS AND A BANDONMENT
L OR ALTER CASING CHANGE PLANS CASING TEST AND CEMENT JOS	
OTHER Status: Drling or co	ompleting X
PTHER	•
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated work) SEE RULE 1103.	date of starting any proposed
sway san note that	
Ran surface casing as follows: Ran 7 jts, 8-5/8", 23#, J-8RT-STC-R3 new	casing w/guide
shoe & insert float measuring 295.31' & landed @ 310.31'KB. Cemented w/2	250 sxs, Class B
cement + 3% CaCl and 1/4#/sx. Cello-Flake. Bumped plug w/600 psi @ 9:15	a.m., 7/21/80.
Lost pump pressure immediately and pipe jumped up l' and fell back as lan 3' on outside of casing. Full returns while cementing. NU BOP and teste	ided. Cement fell
held o.k. after 18 hours.	a with 1000 psi
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	and the first
	6251900
AL.	erfich com cost
ALL OIL	62 5 1910 CON. CCAS- DISS: 5
A S	62 5 1955 CON. CCAS- DISSI- 5
OIL	62 F 1913 CON. CCAS- DIST. 5
	62 5 1910 CON. CCAR DISS. 5
hereby certify that the information above is true and complete to the best of my knowledge and belief.	CON. CCAL.
hereby certify that the information above is true and complete to the best of my knowledge and belief.	D:87 3
	D:87 3
hereby certify that the information above is true and complete to the best of my knowledge and belief. **Emgt 3, Judy ****** Manager-Drilling & Production Date.***	D:87 3

notify this office of coment accounters while chilling out