

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1424.
5. LEASE DESIGNATION AND SERIAL NO.

NM-036253

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR
Skelly Oil Company

3. ADDRESS OF OPERATOR
1860 Lincoln Street, Denver, Colorado 80203

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1976' FSL & 659' FWL Section 16-25N-11W

7. UNIT AGREEMENT NAME

East Bisti Unit

8. FARM OR LEASE NAME

9. WELL NO.

2

10. FIELD AND POOL, OR WILDCAT

Bisti Lower Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Section 16-25N-11W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)

6415' GR KB 6423.6'

12. COUNTY OR PARISH

San Juan

13. STATE
New Mexico

16. 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 COMPLETION <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" 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 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.)*

This well has reached the economic limit and is no longer profitable to operate.
Plans are to plug and abandon this well; plugging as follows:

First Plug - 100' plug across Gallup Zone perforations 4938-4961'

Second Plug - 50' inside the 4-1/2" casing and 50' above where casing is shot in two

Third Plug - 150' cement plug extending downward from above the Fruitland Coal
section across the Pictured Cliffs Sand

Fourth Plug - 100' plug at bottom of Ojo Alamo Sand (unless surface casing is set
through the Ojo Alamo Sand)

10 sacks of cement in top of surface casing with dry hole marker



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

SIGNED [Signature] TITLE District Operations Supt. DATE June 10, 1971

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____
CONDITIONS OF APPROVAL, IF ANY:

