

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on reverse 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. <b>OIL WELL</b> <input type="checkbox"/> <b>GAS WELL</b> <input checked="" type="checkbox"/> <b>OTHER</b>  |  | 5. <b>LEASE DESIGNATION AND SERIAL NO.</b><br>N00-C-14-20-5339                       |
| 2. <b>NAME OF OPERATOR</b><br>JEROME P. McHUGH  |  | 6. <b>IF INDIAN, ALLOTTEE OR TRIBE NAME</b><br>Navajo Allotted                       |
| 3. <b>ADDRESS OF OPERATOR</b><br>P O Box 809, Farmington, NM 87499-0809   |  | 7. <b>UNIT AGREEMENT NAME</b>  |
| 4. <b>LOCATION OF WELL</b> (Report location clearly and in accordance with any State requirements.*<br>See also space 17 below.)<br>At surface<br><br>1650' FSL - 1650' FWL |  | 8. <b>FARM OR LEASE NAME</b><br>Chaco Plant  |
| 14. <b>PERMIT NO.</b>   |  | 9. <b>WELL NO.</b><br>19   |
| 15. <b>ELEVATIONS</b> (Show whether DF, RT, GR, etc.)<br>6098'  |  | 10. <b>FIELD AND POOL, OR WILDCAT</b><br>NIPP-Picture Cliff Ext.                     |
|   |  | 11. <b>SEC., T., R., M., OR BLK. AND SURVEY OR AREA</b><br>Sec. 22, T26N, R12W, NMPM |
|   |  | 12. <b>COUNTY OR PARISH</b><br>San Juan  |
|   |  | 13. <b>STATE</b><br>NM   |

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

| NOTICE OF INTENTION TO: |                          | SUBSEQUENT REPORT OF: |                                     |
|-------------------------|--------------------------|-----------------------|-------------------------------------|
| TEST WATER SHUT-OFF     | <input type="checkbox"/> | WATER SHUT-OFF        | <input type="checkbox"/>            |
| FRACTURE TREAT          | <input type="checkbox"/> | FRACTURE TREATMENT    | <input type="checkbox"/>            |
| SHOOT OR ACIDIZE        | <input type="checkbox"/> | SHOOTING OR ACIDIZING | <input type="checkbox"/>            |
| REPAIR WELL             | <input type="checkbox"/> | (Other)               | <input type="checkbox"/>            |
| (Other)                 | <input type="checkbox"/> |                       |                                     |
| PULL OR ALTER CASING    | <input type="checkbox"/> | REPAIRING WELL        | <input type="checkbox"/>            |
| MULTIPLE COMPLETE       | <input type="checkbox"/> | ALTERING CASING       | <input type="checkbox"/>            |
| ABANDON*                | <input type="checkbox"/> | ABANDONMENT*          | <input checked="" type="checkbox"/> |
| CHANGE PLANS            | <input type="checkbox"/> |                       |                                     |

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.)\*

11/15/88 Rigged up Cementers Inc. on 2-7/8" casing.  
Pumped 2 bbls. water and 34 sk Class "B" cement (40 cu.ft.).  
Plug down at 10:30 a.m. on 11/15/88 with 800 psi.  
Cement plug placed from surface to TD.

12/6/88 Dry hole marker installed, location cleaned and restored.

RECEIVED  
MAIL ROOM  
88 DEC -8 PM 1:31  
FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO

Approved as to plugging  
Liability under bond for  
surface restoration is complete

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

SIGNED James S. Hazen  
James S. Hazen

TITLE

Field Supt.

DATE 12/7/88

(This space for Federal or State office use)

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

NMOCC

\*See Instructions on Reverse Side