

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

only 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 type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER		5. LEASE DESIGNATION AND SERIAL NO. Indian 16-008469
2. NAME OF OPERATOR Consolidated Oil & Gas, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME I 149-IND 8469
3. ADDRESS OF OPERATOR PO Box 2038, Farmington, NM 87499		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 840' FSL & 790' FWL (SW/SW) (M) JAN 14 1985		8. FARM OR LEASE NAME LINDA
14. PERMIT NO.		9. WELL NO. 1
15. ELEVATIONS (Show whether DT, KT, GR, etc.) 6082' GR		10. FIELD AND POOL, OR WILDCAT Blanco MV/Ballard PC
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 31, T27N, R8W
		12. COUNTY OR PARISH San Juan
		13. STATE 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"/>	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 PLANE <input type="checkbox"/>	(Other) <input type="checkbox"/>	
(Other) <input type="checkbox"/>			

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

17. TESTS 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 been commingled through a hole in the tubing since May 1975. It is our intent to remove the packer and the MV and PC production tubing. (The MV tubing string became stuck and wasn't pulled out of the packer during the 1974 workover.) We intend to run a new single string of tubing and land at approximately 4300'. We will install rods and pump in tubing if necessary to remove liquids.

RECEIVED
MAR 15 1985
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct
SIGNED Barbara C. Rex TITLE Engineering Technician DATE ACCEPTED FOR RECORD

(This space for Federal or State office use)
APPROVED BY _____ TITLE _____ DATE MAR 14 1985
CONDITIONS OF APPROVAL, IF ANY: _____
FARMINGTON RESOURCE AREA
DISTRICT _____
BY JL

*See Instructions on Reverse Side

NMOCC