

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No NMNM 020496
2. Name of Operator RODDY PRODUCTION COMPANY, INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P. O. BOX 2221, FARMINGTON, NM 87499-2221 325-5750	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1190'FSL, 1190' FEL SEC. 20, T27N, R11W, NMPM	8. Well Name and No. YOCKEY NO. 1
	9. API Well No. 3004506350
	10. Field and Pool, or Exploratory Area WEST KUTZ PICTURED CLIFF
	11. County or Parish, State SAN JUAN COUNTY, NM

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other RETURN TO PRODUCTION
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. 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.)\*

WELL OFF OVER 90 DAYS. WELL ON AUGUST 12, 1994

RECEIVED  
SEP - 2 1994  
OIL CON. DIV.  
DIST. 3

RECEIVED  
SEP 17 1994  
070 FARMINGTON, NM

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

Signed <u>Kenneth E. Rowley</u>	Title <u>PRESIDENT</u>	Date <u>AUGUST 16, 1994</u>
(This space for Federal or State office use)		
Approved by _____	Title _____	Date _____
Conditions of approval, if any:		

AUG 31 1994

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false statements or representations as to any matter within its jurisdiction.

\*See Instruction on Reverse Side  
NMOCD