

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse 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. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Texaco Inc.

3. ADDRESS OF OPERATOR
P. O. Box EE Cortez, Co. 81321

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
990' FSL 990' FEL

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, OR, etc.)
5994' KB

RECEIVED

OCT 22 1986

5. LEASE DESIGNATION AND SERIAL NO.
NM 12020

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Kirby Gallegos

9. WELL NO.
#1

10. FIELD AND POOL, OR WILDCAT
Gallegos-Gallup

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 26, T27N, R13W

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 PLANS <input type="checkbox"/>	(Other) P & A <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.)*

All equipment, fence post and debris has been removed, except El Paso Natural Gas meter run & drip. A letter (attached) has been sent to EPNG. to remove their equipment. El Paso Natural Gas stated by phone they would remove their equipment in the near future.

OCT 28 1986
OIL CON. DIV.
DIST. 3

18. I hereby certify that the foregoing is true and correct
SIGNED [Signature] TITLE Area Supt. DATE 10/20/86

ACCEPTED FOR RECORD

(This space for Federal or State office use)

OCT 27 1986

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

BLM (6) NMOGCC (3) JNH LAA ARM

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

BY an

NMOGCC