

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(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 AAA *AAA Co*  
*L. P. Moore, Inc.*
3. ADDRESS OF OPERATOR  
*P.O. Box 772851 St. Louis, Mo. 63117*
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface

610' FNL 620' FWL

14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.)

DF 5983

5. LEASE DESIGNATION AND SERIAL NO.  
*SF 078480*
6. IF INDIAN, ALLOTTEE OR TRIBE NAME
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME  
*Federal "E"*
9. WELL NO.  
*1-A*
10. FIELD AND POOL, OR WILDCAT  
*Blanco Mesa Verde*
11. SEC., T., S., M., OR BLE. AND SURVEY OR AREA  
*Sec. 25-27N-8W*
12. COUNTY OR PARISH 13. STATE  
*San Juan N.M.*

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

FRACTURE TREAT

SHOOT OR ACIDIZE

REPAIR WELL

(Other)

PULL OR ALTER CASING

MULTIPLE COMPLETION

ABANDON\*

CHANGE PLANS

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT\*

(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.)\*

*Pull 1 1/2" tubing and run back in with a packer. Set packer at 3750' and swab on Mesa Verde perforations to restore gas production. Projected start date - May 18, 1988.*

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

SIGNED

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

TITLE

*NMOCD*

\*See Instructions on Reverse Side

APPROVED

DATE *5/11/89*

MAY 22 1989

AREA MANAGER  
FARMINGTON RESOURCE AREA