

6 BLM 1 McHugh
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

1 File
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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER P & A	5. LEASE DESIGNATION AND SERIAL NO. NM 16476
2. NAME OF OPERATOR Jerome P. McHugh	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS OF OPERATOR P O Box 208, 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 1170' FNL - 1100' FWL 1770'	8. FARM OR LEASE NAME Bengal C
RECEIVED JAN 29 1987 BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA	9. WELL NO. 6
	10. FIELD AND POOL, OR WILDCAT WAW Fruitland PC
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 36, T27N, R13W, NMPM	12. COUNTY OR PARISH San Juan
13. STATE NM	
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, CR, etc.) 5975' GL

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 checked="" type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)*

This well was plugged and abandoned on 12-8-86 as follows:

1. Pulled tubing.
2. Plugged well by filling 2-7/8" tubing with cement from P.B.T.D. 1250' to surface.

Will install dry hole marker and clean and restore location when weather permits.

Approved as to plugging of the well bore.
Liability under bond is retained until
surface restoration is completed.

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

SIGNED Sherman E. Dugan TITLE Geologist

(This space for Federal or State office use)

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

*See Instructions on Reverse Side

APPROVED

DATE 1-22-87

FEB 02 1987

DATE Jan 22 1987

AREA MANAGER
FARMINGTON RESOURCE AREA