## ULTTE. ST L DEMORTMENT OF THE MEMORE GEOLOGICAL EUR -

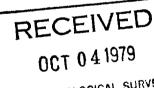
PULL OR ALTER CASING

MULTIPLE COMPLETE CHANGE ZONES ABANDON\*

	Budget Bu <b>d</b> au No. 42–R1424
UNITE. STO	. E. LEZCE
DEMARKS OF THE STARS	DDCG+C-14-20-7481
GEOLOGICAL SUI L	C. IF INDIAN, ALLOTTEE OR TRIBE NAME
Construction for proposals to drill or to deepen or plug back to a different reservoir, the norm 9-331-0 for such proposals.)	NAYAJO 7. UNIT AGREEMENT NAME 8. FARM OR LEASE NAME
2. to ther well other	DOME_NAVAJO 21-27-13 9. WELL NO.
2. MAME OF OFERATOR	1
LOME PITROLEUM CORPORATION	10. FIELD OR WILDOAT NAME
5. ADDILECC OF OPERATOR 5.01 Airport Brive	HAW FRUITLAND-PICTURED CLIFT
Suite 107, Farmington, NM 87401	11. SEC., T., R., M., OR BLK. AND SURVEY OR
4. LOCATION OF WELL (REPORT LOCATION CLEARLY. See space 17	AREA
below) AT SUPF/CE: 1120' PGT 1120' PFT	SEC. 21, T27N, R13W  12. COUNTY OF PARISH: 13. STATE
AT TOP PROD. INTERVAL:	
AT TOTAL DEPTH:	SAN JUAN NEW MEXICO
16. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE.	14. AFI NO.
REPORT, OR OTHER DATA	15. ELEVATIONS (SHOW DF, KDB, AND WD)
REQUEST FOR APPROVAL TO: SUBSEQUENT REPORT OF:	6053' GR
TEST WATER SHUT-OFF	(NOTE: Report results of multiple completion or zone
·· <del>-</del> ······· ·· <del>-</del>	Crore report it sums of multiple completion of zone

change on Form 9-330.)

- (other) REVISION OF APD 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.)\*
- 1. Install 6" 900 series Double Ram BOP. Test BOP before crilling out from under surface pipe. Test pipe rams daily. Test blind rams on trips.
- 2. Drill 7 7/8" hole to 90'. Run 90' of  $5\frac{1}{2}$ ", 15.5# K-55 surface casing. Cement with 75 sacks class "B" cement with 2% CaCl. Circulate cement.



U. S. GEOLOGICAL SURVEY FARMINGTON, N. M.

Set @

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

Subsurface Safety Valve: Manu. and Type \_

IGNED HOLLINGSWO	RTH TITUERLG & PROD	FOREMAN DATE October 2, 1979	
	ite office use)	_	
PPROVED BY	TITLE	DATE	

\*See Instructions on Reverse Side

