

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE
(Other instructions on reverse 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
Superior Oil Company, The

3. ADDRESS OF OPERATOR
9 Greenway Plaza, Ste 2700, Houston, TX 77046

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface 1010 FSL & 1130 FWL

14. PERMIT NO. KB - 5979

15. ELEVATIONS (Show whether DF, BT, GR, etc.)

5. LEASE DESIGNATION AND SERIAL NO
1-149-IND-8465

6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME
Charles, et al

9. WELL NO.
1E

10. FIELD AND POOL, OR WILDCAT
Basin Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OF AREA
Sec. 12, T-27N, R-9W

12. COUNTY OR PARISH **13. STATE**
San Juan NM

RECEIVED
MAR 14 1986
BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

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 PLANE <input type="checkbox"/>	(Other) <u>Shut-in</u>	
(Other) <u>Temporary Abandon</u>		(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 shut in 11-7-84.

Shut-in

Request authority to retain well as temporarily abandoned as we are unable to secure a gas contract at present time.

RECEIVED
MAR 20 1986
OIL CON. DIV.
DIST. 3

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

SIGNED Nancy Lewis **TITLE** MORE PRODUCING T. O. N. M. INC. AS AGENT FOR THE SUPERIOR OIL COMPANY **DATE** 3-12-86

(This space for Federal or State office use)

APPROVED BY _____ **TITLE** _____ **DATE** _____

CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

MAR 18 1986

*See Instructions on Reverse Side
NMOCC

FARMINGTON RESOURCE AREA

BY [Signature]