

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse side)

APPROVAL
BUDGET NUMBER (See 12-1-1)
5. LEASE DESIGNATION AND SERIAL NO.

I-89-IND-58

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

Red Rimpart

8. FARM OR LEASE NAME

9. WELL NO.

2X

10. FIELD AND POOL, OR WILDCAT

Hogback Dakota

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA

Sec 30,
T29N, R16W

1. ☐ OIL WELL ☐ GAS WELL ☐ OTHER **Dry Hole**

2. NAME OF OPERATOR

Stephen H. Kinney

3. ADDRESS OF OPERATOR

207 N. Orchard St. Farmington, New Mexico 87401

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

~~330/N & 2475/W~~
381/N & 2475/W

14. PERMIT NO.

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

5114 gl

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

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETE

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other)

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREATMENT

ALTERING CASING

SHOOTING OR ACIDIZING

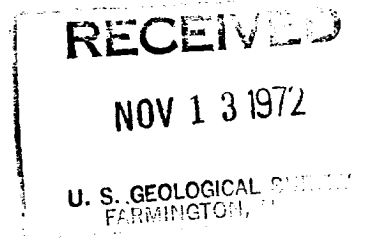
ABANDONMENT*

(Other)

(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.)*

Propose to P&A with 20 sacks cement from 786' TD to 586', and 3 sacks 0' to 10' with 4" dry hole marker six feet in hole, four feet above surface.



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

SIGNED

Stephen H. Kinney

TITLE

Operator

DATE 11/13/72

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side