

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

SF-078766

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

7. UNIT AGREEMENT NAME

Rosa Unit

8. FARM OR LEASE NAME

9. WELL NO.

59

10. FIELD AND POOL, OR WILDCAT

Blanco Mesaverde/Gallup

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

SE/SW Sect 25, T31N, R6W

14. PERMIT NO.

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

6400' GR

12. COUNTY OR PARISH

Rio Arriba

13. STATE

NM

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) status

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.)*

The above referenced well is shut-in waiting on weather and road conditions to improve. Additional completion work will follow. A completion report will be submitted upon the completion work being completed.

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

SIGNED

Original Signed By
B. D. Shaw

TITLE Administrative Supervisor

DATE 4-6-84

(This space for Federal or State office use)

ACCEPTED FOR RECORD

APPROVED BY

TITLE

DATE APR 10 1984

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA

BY smm

*See Instructions on Reverse Side
NMOCC