

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

5. LEASE DESIGNATION AND NUMBER
6. UNIT AGREEMENT NAME
7. NAME OF LEASEE OR TRIBE NAME

SF- 078977

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. NAME OF OPERATOR Ladd Petroleum Corporation		2. UNIT AGREEMENT NAME FARMINGTON RESOURCE AREA	
3. ADDRESS OF OPERATOR 3535 East 30th. Suite 224A Farmington, New Mexico 87401		3. NAME OF LEASEE OR TRIBE NAME FARMINGTON, NEW MEXICO	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1060 FSL, 790 FWL.		9. WELL NO. 1	
10. FIELD AND POOL, OR WILDCAT Basin Dakota		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19 T30N R13W	
12. COUNTY OR PARISH San Juan		13. STATE N.M.	

14. PERMIT NO. _____ 15. EXPLANATIONS (Show whether DF, RT, GR, etc.) _____

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF	☐	WATER SHUT-OFF	☐
FRAC TREATMENT	☐	FRAC TREATMENT	☐
SHOOTING OR ACIDIZE	☐	SHOOTING OR ACIDIZING	☐
ABANDON WELL	☐	(Other)	☐
PULL OR ALTER CASING	☐	REPAIRING WELL	☐
MULTIPLE COMPLETION	☐	ALTERING CASING	☐
ABANDON	☐	ABANDONMENT	☒
CHANGE PLANS	☐		

(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.*

IN reference to your letter dated Dec. 22, 1987. Due to the weather conditions we asking for an extension of 120 days to complie with these stipulations.

RECEIVED
JAN 28 1988
OIL CON. DIV.
DIST. 3

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

SIGNED Phil Errey TITLE Field Supt. DATE 1-14-88

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE JAN 28 1988

CONDITIONS OF APPROVAL, IF ANY:

MOCC
AREA MANAGER

*See Instructions on Reverse Side