16.

UNITED STATES SUBMIT IN TRIPLICATE* Other instructions on reverse side)

	SF 081299-A	
SUNDRY (Do not use this form Use	6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
i.		7. UNIT AGREEMENT NAME
WELL WELL GAS WELL	OTHER	J. J. Lommori "B"
2. NAME OF OPERATOR	8. FARM OR LEASE NAME	
Clinton Oil Cor	mpany	NE Hogvack Unit
3. ADDRESS OF OPERATOR		9. WELL NO.
P. O. Box 243	4 - Casper, Wyoming 82601	19
4. LOCATION OF WELL (Report See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Horseshoe Gallup 11. SEC., T., B., M., OB BLE. AND SURVEY OR AREA	
660' FSL and 1	980' FEL	Sec. 13-T30N-R16W
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	5407' GL	San Juan N. Mexico

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data					
NOTICE OF INTENTION TO: SUBSEQUENT REPORT O		PORT OF:			
			REPAIRING WELL		
TEST WATER SHUT-OFF	PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL		
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING		
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*		
REPAIR WELL	CHANGE PLANS	(Other)	tiple completion on Well		
(Other)		NOTE: Report results of multiompletion or Recompletion Re	eport and Log form.)		
DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting					

17. proposed work.

8-5/8" - set at 209' w/160 sacks cement

5-1/2" - set at 4063' w/130 sack cement

3890' - 3924' Upper Gallup Perf:

3990'-4011' Lower Gallup

Propose to plug back with sand from PBTD-4027'-3850'

Place 15 sack cement plug 3850'-3730'

Shoot off 5-1/2" casing. Pull and lay down

Place 25 sack cement plug 50' inside and 50' above 5-1/2" casing stu

Place 50 sack cement plug 23%5'-2245' (Pt. Lookout 2295'-2605')

Place 30 sack cement plug 780'-680' (Menefee 730'-2295')

Place 20 sack cement plug 209'-159'

Place 10 sack cement plug 30'-GL

Install dry hole marker

Clean up location

1.87	: CD 16
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	CON. (
b	DIST.

18. I hereby certify that the foregoing is true and correct SIGNED Well	TITLE Destant Manager	DATE 4/30/>4
(This space for Federal or State office use)		
APPROVED BYCONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE