

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Budget Project No. 07-10524
5. LEASE DESIGNATION AND SERIAL NO.

NM 04443

6. IF INDIAN, COUNTRY OR TRIBE NAME

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 ☐

7. UNIT AGREEMENT NAME

N.E. Hogback Unit

8. FARM OR LEASE NAME

2. NAME OF OPERATOR

9. WELL NO.

22

3. ADDRESS OF OPERATOR

10. FIELD AND FOOT OR WILDCAT

Horseshoe Gallup

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

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

Sec 15, T30N, R16W

14. PERMIT NO.

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

5,448' R.D.B.

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF ☐

FRACTURE TREAT ☐

SHOOT OR ACIDIZE ☐

REPAIR WELL ☐

(Other) Temp Abandonment Extension ☒

PULL OR ALTER CASING ☐

MULTIPLE COMPLETE ☐

ABANDON* ☐

CHANGE PLANS ☐

SUBSEQUENT REPORT OF:

WATER SHUT-OFF ☐

FRACTURE TREATMENT ☐

SHOOTING OR ACIDIZING ☐

(Other) ☐

REPAIRING WELL ☐

ALTERING CASING ☐

ABANDONMENT* ☐

(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.) *

Evaluation of producing this well is still in progress. We request approval of an extension of the temporary abandoned status of this well pending the outcome of the present evaluation.

Well was shut-in 3-7-78 due to uneconomical oil production.



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

SIGNED

Alan B. Barner

TITLE Dist. Prod. Engr. RMD

DATE 3-27-79

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

*See Instructions on Reverse Side

NMOCC