

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. <b>NMS F 080212-A</b>
2. Name of Operator <b>H &amp; S Production</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>5495 S Hwy 64 N/BY 3001 FARMINGTON, NM 87401</b>	7. If Unit or CA, Agreement Designation <b>A #1</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>UNIT LETER 5 SECTION 4 Township 30 North RANGE 15 WEST NMPM; 660' FEET FROM NORTH LINE, 1980 FEET FROM WEST LINE, 6' ELEVATION 5445'</b>	8. Well Name and No. <b>MALCO COPPLE</b>
	9. API Well No. <b>30045100610051</b>
	10. Field and Pool, or Exploratory Area <b>VERDE GALLUP</b>
	11. County or Parish, State <b>SAN JUAN NEW MEX.</b>

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)\*

- ① clean location;  
② pickup flowline;  
③ site is ready for final abandonment;
- C. H. - 30N - 15W

RECEIVED  
JUN - 7 1999  
OIL CON. DIV.  
DIST. 3

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

Signed **R. E. Little**

Title **AGENT PART OWNER**

Date **4-13-99**

(This space for Federal or State office use)

Approved by **/S/ Duane W. Spencer**

Title **Team Lead, Petroleum Management**

Date **JUN - 4 1999**

Conditions of approval, if any: