

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

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 <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. NM-09867-A
2. NAME OF OPERATOR R & G Drilling Company, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME --
3. ADDRESS OF OPERATOR 1775 Broadway, New York, N. Y. 10019		7. UNIT AGREEMENT NAME SW-124
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1850 FSL - 1650 FWL W/2 Sec 8, T 30 N, XXXX R 13 W		8. FARM OR LEASE NAME Lunt
14. PERMIT NO.		9. WELL NO. #65
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5530-KB, 5518-GL		10. FIELD AND POOL, OR WILDCAT Dakota
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec 8, T30N, R13W
		12. COUNTY OR PARISH San Juan
		13. STATE N. M.

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

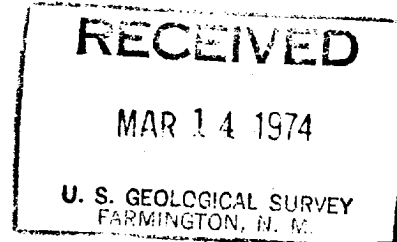
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input checked="" type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(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.)*

3/4 Federal - 9.375% Royalty
1/4 Fee - 3.125% "

Hole in casing cannot be economically repaired at current price of gas.
Operator shall load hole with water, spot 25 sacks of neat cement on bottom across Dakota perforations, 5968-6092, through tubing. Pull tubing and freepoint casing. Pull casing and spot 25 sacks cement over casing stub.; if below Mesa Verde, Operator will cover Mesa Verde with cement. Spot 50 sacks over Pictured Cliffs at 1550 and 50 sacks over Ojo Alamo at 700 feet.
Remove bradenhead and set ~~P~~ marker with 10 sacks cement.



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

SIGNED [Signature] TITLE President DATE 3-11-74

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY: