

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

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

Form approved.
Budget Bureau No. 42-R1424.

5. LEASE DESIGNATION AND SERIAL NO.

14-20-0603-639

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

King Kong

9. WELL NO.

King Kong #18

10. FIELD AND POOL, OR WILDCAT

Salt Creek

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

Sec. 4-T30N-R17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

1. ☐ OIL WELL ☒ GAS WELL ☐ OTHER
2. NAME OF OPERATOR
R. A. Crane, Jr.
3. ADDRESS OF OPERATOR
2802 E. 20th Farmington, New Mexico 87401
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

2470' FSL 2010' FEL

14. PERMIT NO.

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

5097' GR.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

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PULL OR ALTER CASING

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MULTIPLE COMPLETION

ABANDON*

CHANGE PLANS

REPAIR WELL
(Other)

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

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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.)

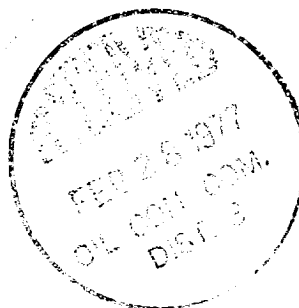
17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Intend to P and A.

Spudded 7 7/8" hole 8/12/75. Set 30' of 5 1/2" casing, cement with 5 sacks cement. Drilled 4 3/4" hole to TD 1078'. Will install dry hole marker and abandon hole.

Plugging: Cement from 900' to 1078' with 10 sacks cement.
Cement from 574' to 374' with 10 sacks cement.
Top plug and set dry hole marker.

Tosito-Gallup Top: 474'
Dakota Top : 1065'
TD : 1078'



FEB 25 1977

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

SIGNED

Serena M. Anderson
Serena M. Anderson

TITLE

Secretary

DATE October 1, 1975

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

Alleg

*See Instructions on Reverse Side