

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.

16

10. FIELD AND POOL, OR WILDCAT

Salt Creek Dakota

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

Sec. 4, T30N, R17W

12. COUNTY OR PARISH

San Juan

13. STATE
New Mex.

1. OIL ☒ GAS ☐
WELL WELL OTHER

2. NAME OF OPERATOR

TASCO

3. ADDRESS OF OPERATOR

501 Airport Dr. Suite 110, Farmington, N.Mex.

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

2310 FNL

1780 FEL

14. PERMIT NO.

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

5103 Gr.

16. 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)

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.)

Plugged: Cement from 1071 to 921 with 10 sacks of Cement.

Cement from 521 to 421 with 20 sacks of cement

Cleaned and graded location

Installed dry hole marker as percribe

10 sack of cement in top with marker

APPROVED

JUN 15 1979

P. T. McGRATH

DISTRICT ENGINEER

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

SIGNED

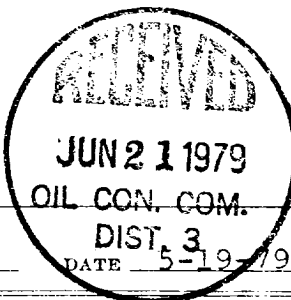
TITLE Operator

(This space for Federal or State office use)

APPROVED BY
CONDITIONS OF APPROVAL, IF ANY

TITLE

DATE



*See Instructions on Reverse Side