

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

Form approved.  
Budget Bureau No. 1004-0135  
Expires August 31, 1985

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	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR Wexpro Company	8. FARM OR LEASE NAME Stevens
3. ADDRESS OF OPERATOR P. O. Box 458, Rock Springs, Wyoming 82902	9. WELL NO. 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface NW NE 790' FNL, 1520' FEL	10. FIELD AND POOL, OR WILDCAT Fruitland
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 29-30N14W
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH San Juan
	13. STATE New Mexico

RECEIVED

JUL 30 1986

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"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) Request Long Term Shut-in	XX

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other)	
(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.)\*

Wexpro Company requests permission to shut-in the above captioned well under the guidelines for long-term shut-in wells. The Stevens Well No. 1 is approximately 2 miles from the nearest gas sales line and the production test indicates that the well cannot produce adequate gas volumes to make the pipeline a commercial venture. Also the well lacks a sale agreement in any form. It is the Wexpro Company's request that the Stevens Well No. 1 be shut in until such time that subsequent drilling could allow for significant gas volume to justify the pipeline. Should you have any questions concerning this matter, please contact me at 307-382-9791.

This Approval Or Temporary  
Abandonment Expires 8-18-87

RECEIVED  
AUG 20 1986  
OIL CON. DIV.  
DIST. 3

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

SIGNED E. D. Marsh

TITLE Petroleum Engineer

(This space for Federal or State office use)

APPROVED  
AS AMENDED  
JUL 20 1986

APPROVED BY  
CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

AUG 18 1986

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

\*See Instructions on Reverse Side

for AREA MANAGER

NMOCC