

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

8. PERMIT IN TRIPLICATE
OTHER INSTRUCTIONS OF THE
FISCAL SIGN

Form approved.
Budget Bureau No. 41-8142-
LEASE DESIGNATION AND SERIAL NO.

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"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR WILLIAM C. RUSSELL	8. FARM OR LEASE NAME LUNT
3. ADDRESS OF OPERATOR 745 Fifth Avenue New York, N. Y. 10022	9. WELL NO. 62-E
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1190 FSL - 1520 FEL	10. FIELD AND POOL, OR WILDCAT Basin Dakota
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 18 T30N-R13W
15. ELEVATIONS (Show whether FT., RT., GR., etc.) 4740	12. COUNTY OR PARISH 13. STATE San Juan NM

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 COMPLETION <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input checked="" 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).*

Spud Date: 5-14-81

Surface Casing: 304' x 24" x 250 sacks cement (circulated)

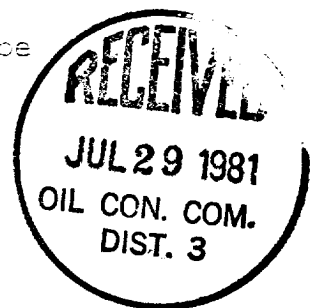
Production Casing: 6418' x 11.3" x 200 sacks cement

Halliburton DV Pool at 4510 - NAME NOT KNOWN

5-11-81: 2 3/8" tubing, 3 3/4' and sub landed at 4150'

Once casing pressure is sufficiently reduced, casing will be perforated at 4500' and 1,000 sacks of Halliburton Light, plus 12 1/2 galsonite, will be circulated to surface.

No electric logs run; Gamma Ray-Nestron (5 copies) will be supplied when received from Welox.



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

SIGNED W. C. Russell TITLE Operator DATE 7-20-81

(This space for Federal or State office use)

APPROVED BY _____ DATE _____

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

NMOCCA

JUL 28 1981