

November 1983)  
Formerly 9-331)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

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 ☒ GAS WELL ☐ OTHER ☐

2. NAME OF OPERATOR  
A.P.A. DEVELOPMENT, INC.

3. ADDRESS OF OPERATOR  
Box 215 Cortez CO. 81321

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.\*  
See also space 17 below.)  
At surface  
1650' FSL 2280' FEL

14. PERMIT NO. \_\_\_\_\_ 15. ELEVATIONS (Show whether DF, RT, OR, etc.) \_\_\_\_\_

5. LEASE DESIGNATION AND SERIAL NO.  
14-20-603-5012

6. IF INDIAN ALLOTTEE OR TRIBE NAME  
Navajo

7. UNIT AGREEMENT NAME  
\_\_\_\_\_

8. FARM OR LEASE NAME  
NAVajo

9. WELL NO.  
10

10. FIELD AND POOL, OR WILDCAT  
MANY ROCKS (Gally)

11. SEC., T., R., M., OR BLE. AND SURVEY OR AREA  
27-T.32N-R.17W

12. COUNTY OR PARISH  
SAN JUAN N.M.

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 type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <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.)

Long term shut-in

RECEIVED

NOV 5 1991

OR CON. DIV.  
DIST. 3

THIS APPROVAL EXPIRES SEP 01 1992

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

SIGNED Pete Wooly

TITLE President A.P.A. Dev.

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY: \_\_\_\_\_

TITLE \_\_\_\_\_

APPROVED  
DATE 11/5/91

DATE NOV 14 1991

[Signature]  
AREA MANAGER  
FARMINGTON RESOURCE AREA

\*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.