

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on reverse 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 <input type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input checked="" type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-585
2. NAME OF OPERATOR APA Development, Inc.		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo
3. ADDRESS OF OPERATOR Box 215 Cortez CO. 81321		7. UNIT AGREEMENT NAME
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 943' FSL 840' FWL		8. FARM OR LEASE NAME Navajo AA
		9. WELL NO. 8
		10. FIELD AND POOL, OR WILDCAT North Many Rocks (Gallup)
		11. SEC., T., R., & S., OR BLK. AND SURVEY OR AREA 17-T.32N R.17W.
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, OR, etc.)	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

PULL OR ALTER CASING

WATER SHUT-OFF

REPAIRING WELL

FRACTURE TREAT

MULTIPLE COMPLETE

FRACTURE TREATMENT

ALTERING CASING

SHOOT OR ACIDIZE

ABANDON*

SHOOTING OR ACIDIZING

ABANDONMENT*

REPAIR WELL

CHANGE PLANE

(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.*

Plan to continue long term shut-in

RECEIVED
NOV 8 1991
OIL CON. DIV.
DIST. 3

SEP 01 1992

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

SIGNED

Late E. Woolley

TITLE

President APA Dev.

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

DATE

11/5/91

DATE

NOV 1 1991

APPROVED
FARMINGTON, NEW MEXICO

*See Instructions on Reverse Side