

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.

14-20-600-3539

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo-Ute

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo-Ute

9. WELL NO.

1 Lynch

10. FIELD AND POOL, OR WILDCAT

Unnamed

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

Sec. 26, T32N-R17W

12. COUNTY OR PARISH

San Juan

13. STATE

New Mexico

1.

OIL
WELL ☐

GAS
WELL ☐

OTHER

Dry Hole

2. NAME OF OPERATOR

Curtis J. Little

3. ADDRESS OF OPERATOR

2929 Monte Vista NE, Albuquerque, New Mexico

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

1650 FWL

2310 FWL

14. PERMIT NO.

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

5871 RKU

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.)*

Plan to plug 1700 to 1790 (T. D.) with 18.4 cubic feet
of cement. Load hole with water. Place 3 cubic feet
cement in top of surface pipe with regulation dry hole
marker installed therein.

RECEIVED

DEC 2 1965

U. S. GEOLOGICAL SURVEY
FARMINGTON, N. M.

RECEIVED

DEC 22 1965

OIL CON. COM.
DIST. 3

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

SIGNED

Curtis J. Little

TITLE

Operator

DATE

(This space for Federal or State office use)

12-21-65

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

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14-20-600-3539

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

Navajo-Ute

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Navajo-Ute

9. WELL NO.

1 Lynch

10. FIELD AND POOL, OR WILDCAT

Unleased

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

Sec. 26-732N-R17W.

12. COUNTY OR PARISH 13. STATE

San Juan

New Mexico

1.

OIL WELL ☐ GAS WELL ☐ OTHER ☒ Dry Hole

2. NAME OF OPERATOR

Curtis J. Little

3. ADDRESS OF OPERATOR

2923 Monte Vista NE, Albuquerque, New Mexico

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*

See also space 17 below.)

At surface

1150 FNL

2510 FNL

14. PERMIT NO.

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

5671 RKB

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 1/00-1791 (TD) with 16 sx cement in 5-1/4" hole. Loaded hole with water. Placed 3 sx cement and a regulation dry hole marker in top of surface pipe.

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

SIGNED

Curtis J. Little

TITLE

Operator

DATE

Dec. 22, 1965

(This space for Federal or State office use)

APPROVED BY

TITLE

DATE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

