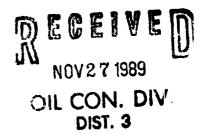
Form 3160-5 (November 1983) (Formerly 9-331)	UNITED STATES DEPARTMENT OF THE INTER BUREAU OF LAND MANAGEMEN		Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. 14-20-603-585 6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SUI (Do not use th	NDRY NOTICES AND REPORTS (is form for proposals to drill or to deepen or plug. Use "APPLICATION FOR PERMIT—" for such i	back to a different reservoir.	Navajo Tribul
1. OIL GAS WELL WELL	OTHER Water injection		7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	\$2.00°	97. 37. 3.	8. FARM OR LEASE NAME
James P.	Woosley		NavajoTÄA
3. ADDRESS OF OPERAT	OB 215, Cortez, CO 81321	10 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	9. WBLL NO. #18
LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.)		10. FIELD AND POOL, OR WILDCAT	
At surface	(10)		North Many Rocks Lower Gal
2474' FSI	. & 133' FEL Sec. 18 T32N R1	7W	Sec. 18 T32N R17W NMPM
14. PERMIT NO.	15. ELEVATIONS (Show whether Di	F, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
	GR 5396'		San Juan NM
16	Check Appropriate Box To Indicate N	Nature of Notice, Report, or C	Other Data
	NOTICE OF INTENTION TO:	SUBSEQ	DENT REPORT OF:
TEST WATER SHUT- FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other)	PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS	WATER SHUT-OFF FRACTURE TREATMENT SHOOTING OR ACIDIZING (Other) (NOTE: Report results Completion or Recomp	REPAIRING WELL ALTERING CASING ABANDONMENT* of multiple completion on Well letion Report and Log form.)
proposed work, nent to this work,	on COMPLETED OFFRATIONS (Clearly state all pertined if well is directionally drilled, give subsurface local).	of details, and give pertinent dates, tions and measured and true vertice.	including estimated date of starting any
1,	Cement from 1510' back to 1410	with 14.62 cu. feet	of cement.
	Place cement plug in stub of s	hot off pipe from 750	' - 850'

- with 34.05 cu. feet of cement.
- 3. Place cement plug from 100' to surface with 34.05 cu. feet.
- Erect proper plug & abandon marker, clean up location & reseed.



18. I hereby certify that the foregoing is true SIGNED ###	TITLE Representative	AATE 10/24/89
(This space for Federal or State office us	e)	
APPROVED BY	TITLE	DATE
		- The Remed STEPHEN MASON
	*See Instructions on Reverse Side	A COMMITTEE OF THE COMM