

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPLICATE*
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 42-R1424.

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO. 14-30-603-215
2. NAME OF OPERATOR James P. Woolley		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Havajo
3. ADDRESS OF OPERATOR Box 1227 Cortez, Colorado 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 500' FEL and 2105' FEL Sec. 19, T32N, R17W		8. FARM OR LEASE NAME Havajo
14. PERMIT NO. Approved Jun 7 P.T. Magrath		9. WELL NO. 12
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 9880 GL		10. FIELD AND POOL, OR WILDCAT Henry James Gallup Lower Gallup
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 19, T32N, R17W
		12. COUNTY OR PARISH San Juan
		13. STATE New Mexico

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) Testing	
(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.)*

**T.D. (1365') was reached on the 7 - 8 - 71: Hole was logged on the 7 - 12 - 71:
Continuing logging and testing to determine if feasible to drill another well in
this area.
Top of lower Gallup SS is 1363':**

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

SIGNED James P. Woolley	TITLE Operator	DATE 8/9/71
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
CONDITIONS OF APPROVAL, IF ANY:		