

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. 14-20-603-585	
2. NAME OF OPERATOR James P. Woosley		6. IF INDIAN, ALLOTTEE OR TRIBE NAME Navajo	
3. ADDRESS OF OPERATOR Box 1227 Cortes, 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 810 ft. from North line and 2310 ft. from East line Sec. 19, T32N, R17W		8. FARM OR LEASE NAME Navajo AA	
14. PERMIT NO. Mr. McGrath 12 - 29 - 71		9. WELL NO. 19 - Y	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 5492 GL		10. FIELD AND POOL, OR WELDCAT Many Rocks Gallup Lower Gallup	
		11. SEC., T., R., E., OR BLK. AND SURVEY OR AREA Sec. 19, T32N, R17W NMPL	
		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:

TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>
(Other) <input type="checkbox"/>	

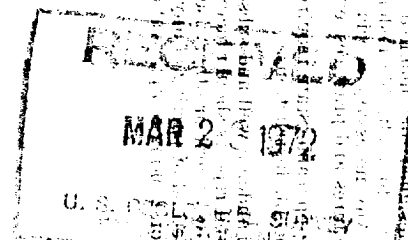
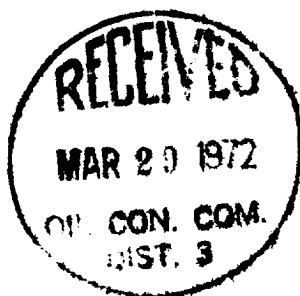
SUBSEQUENT REPORT OF:

WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
(Other) Drilling	

(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.)*

Spudding in on 3 - 11- 72 and drilled a 6 1/4" hole to 100ft. reamed 32" to 9" and ran 32' of 7" casing and cemented to surface with 6 sacks. Drilled a 6 1/4" to 1352'. Cored from 1352' to 1362' 6 1/8 core head and recovered 10 ft. of core. Top of lower Gallup 1351' reached T.D. (1362') on the 3 - 21 - 72



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

SIGNED James P. Woosley TITLE Operator

DATE 3/27/72

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____
CONDITIONS OF APPROVAL, IF ANY:

DATE