

UNITED STATES
DEPARTMENT OF THE INTERIOR
GEOLOGICAL SURVEY

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved.
Budget Bureau No. 42-R1421.
5. LEASE DESIGNATION AND SERIAL NO.
14-20-603-5012
6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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 ☒ GAS WELL ☐ OTHER ☐
2. NAME OF OPERATOR
James P. Woosley
3. ADDRESS OF OPERATOR
Box 1227 Cortez Colorado 81321
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
410' FSL and 2225' FWL
14. PERMIT NO.
P.T. McGrath 6 - 10 - 76
15. ELEVATIONS (Show whether DF, RT, GE, etc.)
5492

Navajo
7. UNIT AGREEMENT NAME
8. FARM OR LEASE NAME
Navajo
9. WELL NO.
15
10. FIELD AND POOL, OR WILDCAT
Many Rocks Gallup
11. SEC., T., R., M., OR BLK. AND
SURVEY OR LOTS
**Sec. 27; T32N; R1W
SE $\frac{1}{4}$ SW $\frac{1}{4}$ NMPM**
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) <input checked="" type="checkbox"/> spudding | |

(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.)*

Spudded 9 - 23 - 76 a 6 $\frac{1}{4}$ " hole, found no surface water reamed 6 $\frac{1}{4}$ " hole to 9"
and set 7" 22# surface casing @ 30.48; cemented to surface well 7 sks. drilling
@ 245"

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

SIGNED James P. Woosley TITLE Operator
(This space for Federal or State office use)

DATE **Sept. 24. 1976**

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

DATE _____