

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry into a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED  
MAIL ROOM  
OCT 16 PM 3:21  
070 FARMINGTON, NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

A.P.A. Development, Inc.

3. Address and Telephone No

P.O. Box 215, Cortez, CO 81321 (970)565-2458

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1450' FSL & 1980' FWL Sec. 26 T32N R17W

5. Lease Designation and Serial No.

14-20-600-3540

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA, Agreement Designation

8. Well Name and No.

"P" # 19

9. API Well No.

300452672800S1

10. Field and Pool, or Exploratory Area

Many Rocks

11. County or Parish, State

San Juan, NM

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment  
☐ Recompletion  
☐ Plugging Back  
☐ Casing Repair  
☐ Altering Casing  
☐ Other

- ☐ Change of Plans  
☐ New Construction  
☐ Non-Routine Fracturing  
☐ Water Shut-Off  
☐ Conversion to Injection  
☐ Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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 well as follows:

1. Equalize cement plug from 1818' - 1630'.
2. Pump inhibited fresh water from 1630' to 150'.
3. Equalize cement plug from 150' to surface.
4. Clean and remediate location, erect dry hole marker.

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

Signed Patricia Woolley

Title Field Supervisor

Date 10/11/95

(This space for Federal or State office use)

Approved by \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Conditions of approval, if any:

APPROVED

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

\*See Instruction on Reverse Side

NMOCD

DISTRICT MANAGER