	Form approved.
6 BLM 1 File LIMITED STATES SUBMIT IN TRIPLICATE.	Budget Bureau No. 1004-0135 Expires August 31, 1985
November 1983) DEDADIATATION OF THE INTERIOR verse side)	5. LEASE DESIGNATION AND SERIAL NO.
Formerly 9-331) DEPARIMENT OF THE INTERNATION AND MANACEMENT	NM 0206995
BUREAU OF LAND MANAGEMENT	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.	7. UNIT AGREEMENT NAME
WELL GAS OTHER Dry Hole	S. FARM OR LEASE NAME
2. NAME OF OPERATOR	Aztec
Thomas A. Dugan 3. ADDRESS OF OPERATOR	9. WELL NO.
	1
PO Box 208, Farmington, NM 87499 1. LOCATION OF WELL (Report location clearly and in accordance with any State requirement of See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT Wildcat
0001 FNIL C 9001 FWI	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
JUN 0 9 1986	Sec. 35, T30N, R14W, NMPA
14. PERMIT NO. 15. ELEVATIONS (Show whether BUREAST OF LAND MANAGEMENT	12. COUNTY OR PARISH 13. STATE
FARMINGTON RESOURCE AREA	San Juan NM
Check Appropriate Box To Indicate Nature of Notice, Report, or C	Other Data
	TENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	BEPAIRING WELL
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE ABANDON* SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL CHANGE PLANS (Other) (NOTE: Report results	of multiple completion on Well
(Other) Completion or Recompletion of Recompl	including estimated date of starting any
The following work was performed in order to bring the No. 1 Az compliance for final abandonment as requested by Stephen Shafra Philliber:	tec well into n and <u>Mark</u>
 Not on the location, on the south side of pad, across the the vicinity of the location, the cable and small pipe were r 	road, in removed.
the vicinity of the location, the cable and small pipe were	
2. Debris and trash were removed.	
	ESEIVED JUN 1 8 1986
	COM. DIV.
18. I hereby certify that the foregoing is true and correct	DATE 6-5-86
SIGNED Sherman & Geologist	DATE 6-5-86
Sherman T. Augan (This space for Federal or State office use)	\$1 tal
TOTAL TO A STATE OF THE STATE O	1 3 1986
APPROVED BY	

*See Instructions on Reverse Side

aclan & Kiner