Form 3160-5		UNI) STATES	res	SUBMIT IN TRIPLI'	Budget Bureau No. 1004-0135 Expires August 31, 1985		
November 1983) Formerly 9-331	DEPAR	DEPARTMENT OF THE INTERIOR Terrese state) BUREAU OF LAND MANAGEMENT			5. LEASE DESIGNATION AND SERIAL NO		
rotmony 3-301	BURI					91-016916 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
(Do not u	SUNDRY NO	OTICES AND RE	PORTS ON		L-C -220	62254 2	
		**************************************		KECEIVED	7. UNIT AGREEMENT		
WELL	WELL X OTHER	Injection W	e11		Saladar (
NAME OF OPER				MAR 14 '90			
ADDRESS OF OL	Barber Oil,	inc. /			9. WELL NO.		
-	P O box 1	9					
See also space At surface	RELL (Report locatio	n clearly and in accordi	ance with any Stat	e requirements & OFFICE	10. FIELD AND POO		
	Unit Le	11. SBC., T., R., M., SURVEY OR A	11. SBC, T., R., M., OR BLE. AND SURVEY OR AREA Sec. 33, T20S, R28E				
	6601	Sac 33 T2					
	15. ELEVATIONS (Show whether DF, RT, QR, etc.)					12. COUNTY OR PARISH 13. STATE	
14 PERMIT NO.		15. ELEVATIONS (S	3205 GR	GR, etc.)	Eddy	NM	
					01.0		
14)	Check	Appropriate Box To	o Indicate Nati	ire of Notice, Report, c			
	NOTICE OF IN	TENTION TO:		SUB	BEQUENT EFFORT OF:		
TEST PATER	SHUT-OFF	PULL OR ALTER CASE	NG	WATER SHUT-OFF	REPAIR	NO WELL	
FRACTURE TR		MULTIPLE COMPLETE		FRACTURE TREATMENT	 	G CABING	
SET OUT OR AC		ABANDON®	X	SHOOTING OR ACIDIZING	ABANDO	MENT*	
ETPAIR WELL		CHANGE PLANS		(Other)	sults of multiple complet	don on Well	
other)				Completion or Rec	ombietion Report and Po	g torm.)	
proposed w	work. If well is dir s work.)*	ANDON: HOTEF		talls, and give pertinent dis and measured and true vo	ertical depths for all ma	rkers and sones perc	
	1 De. 11 wuh	ing and nacker	_			. .	
2. Stretch casing to determine amount of free casing and shoot off at 1						at iree	
						JACTA)	
	3. Go in ho.	So in hole with tubing to one foot off bottom of T.D. and circulate hole full of 9 lb/gal. mud. Symp 50 sacks of cement. Should fill open hole and bring cement above					
	full of						
9	CTC)	The sale and a second and the sale of the					
= 1 = 1. FOI from gurface and circulate FOD DU OI NO						e with	
Pull tubing up to 50° from sufface and effective to 50° from sufface and effect and effe							
							<u> </u>
NOTE:	By calculat	ion top of cem	ent is esti	mated to be appr	coximately 250	to 300	
<u>~</u>							
	Becokes ind	icate 7" casin	ig was run t	to 123' then pull	10-11" in diam	eter.	
	was run. T	heretore, uppe	T 123 OL 1	nole is probably			
	Ć	6					
	A.1/1	ing is true and correct					
Tell of the reby cert	THE TOTAL THE TOTAL	The 13 time and contect	D	resident	DATE	3/5/90	
si ined 🗹	- 100 any	Juny -	TITLE	L COLUCIU	DATE		
This space	for Federal or State	office use)				7 7	

Form approved.

*See Instructions on Reverse Side

APPROVED BY APPROVAL, IP ANY: