Form 3160-5

16.

TEST WATER SHUT-OFF

FRACTURE TREAT

UNITED STATES SUBMIT IN TRIPLICATE.

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

REPAIRING WELL

ALTERING CASING

(Formerly 9-331)	BUREAU OF LAND MANA		rse alde)	NI NI	LEASE DESIGNATION 19782	
SUND (Do not use this to	RY NOTICES AND REPORT FOR PROPERTY OF THE PROP	ORTS ON Wor plug back to a for such proposals.)	ELLS different reservoir.	8.	IF INDIAN, ALLOTTE	C OR TRIBE NAME
1.				7.	UNIT AGREEMENT NA	ME
OIL GAS WELL	other Dry Hole			NO	00-C-14 - 20-5	810
2. NAME OF OPERATOR				8.	FARM OR LEASE NAM	Œ
Dome Petroleum	Corp.			Do	ome Federal	24-21-6
3. ADDRESS OF OPERATOR				9.	WELL NO.	
c/o Kent L. Gil	bert, Suite #2812 1660	Lincoln, D	enver, Co. 80	0264	1	
4. LOCATION OF WELL (Rep.	ort location clearly and in accordance	with any State rec	ulrements.	10.	PIELD AND POOL, O	R WILDCAT
At surface	,	KE	CEIVED	tW	ildcat	
330	'FSL,2310FWL			11.	SEC., T., E., M., OR B SURVEY OR AREA	LE. AND
Sec	. 24, T21N, R6W	JU	N 1 9 1986	Se	ec. 24, T21N	, Rg 6W
14. PERMIT NO.	15. ELEVATIONS (Show	whether DF, RT, GR, e	TAND MANAGEME	NT 12.	COUNTY OR PARISH	13. STATE
	6917'GL,6929'		ON RESOURCE ARE		ındoval	NEW MEXICO

SECOTING OR ACIDIZING ABANDONMENT* (Other) Surface Restoration REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

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 markets and sones pertinent to this work.) *

WATER SHUT-OFF

FRACTURE TREATMENT

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

9/28/85 - Pit area and area on west side was filled in, recontoured, disked, and seeded per BLM stipulations (Seed Mix No. 2)

10/23/85 - Lease number placed on dry hole marker.

PULL OR ALTER CASING

MULTIPLE COMPLETE

NOTICE OF INTENTION TO:

OIL CON. DIV.

. I hereby certify that the foregoing is true and correct	mimi n	ACCEPTED FOR RECORD Agent - Dome Petroleum DATE 6/12/86
(This space for Federal or State office use)	TITLE	JUN 20 1986
CONDITIONS OF APPROVAL, IF ANY:		THE SHAPE OF THE STATE OF THE SHAPE OF THE S

*See Instructions on Reverse Side