			DECENTE	·	FORM APPROVED
Form 3160-5 (June 1990)	DEPARTMEN	TED STATES IT OF THE INTE		, ├	Budget Bureau No. 1004-0138 Expires: March 31, 1993 5 Lease Designation and Serial No.
	BUREAU OF I	LAND MANAGE	98 AUG 17 PM	2: 26	NM-25814
	SUNDRY NOTICES		VII		6. If Indian, Allottee or Tribe Name
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals UN, NM					N/A
SUBMIT IN TRIPLICATE					2. If Unit or CA. Agreement Designation
1. Type of Well	Gas		මුමුල්	BIWER	N/A 8. Well Name and No. 21-17-16
2 Name of Operator	Well Other			CI A G W	OJO SOCORRO #34
M&M	PRODUCITON & OPERATION	ON, INC.	AUG AUG	2 5 1000 W	9. API Well No.
3 Address and Telephone No.					30-043-20737 10: Field and Pool, or Exploratory Area
P.O. BOX 175, COUNSELOR, NM 87018 4 Location of Well (Footage, Sec., T., R., M., or Survey Description)					W.C. GALLUP
	FSL 2200 FEL	,	Dag	ति श ति श	11. County or Parish, State
	10-T21N-R7W				SANDOVAL
12. CHE	CK APPROPRIATE BOX	s) TO INDICATE	NATURE OF N	OTICE, REPORT	r, OR OTHER DATA
TYPE	E OF SUBMISSION		Τ,	YPE OF ACTION	
X N	Notice of Intent		Abandonment Recompletion		Change of Plans New Construction
	iupsequent Report		Plugging Back		Non-Routine bracturing
			Casing Repair		— Water Shut-Off
☐ F	Final Abandonment Notice	$\overline{\mathbb{X}}$	Altering Casing Other Application f Right-of-Way	or pipeline	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Society)
13. Describe Proposed	d or Completed Operations (Clearly state al	l pertinent details, and giv	e pertinent dates, including e	estimated date of starting a	ny proposed work. If well is directionally drilled
Effe Inde	ective as soon as posependent Pipeline Corporations pipeline.	sible. We ar	e awaiting Rig	ght-Of-Way cl	earance so as 4 to their
EXIS	stille piperilie.				
14. I hereby sertify the	hat the foregoing is true and correct				
Signed	nesa MECK	Title	perator 4 A	acure.	Date <u>\$-17-98</u>
	rederal or State office use)				Date 8-21-98
Approved by		Title			Date 0- 61- 18
Conditions of app	proval, if any:				