Form 3160–5
(November 1983)
(Formerly 9–331)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other Instructions on reverse side)

5. LEASE DESIGNATION AND SERIAL NO.
BIA-N00-C-14-20-5883

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.)

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

1.

OIL WELL XX GAS WELL ☐ OTHER

7. UNIT AGREEMENT NAME

2. NAME OF OPERATOR
DIAMOND SHAMROCK EXPLORATION COMPANY

8. FARM OR LEASE NAME
PENISTAJA FEDERAL

3. ADDRESS OF OPERATOR
P. O. BOX 1669, VERNAL, UTAH 84078

RECEIVED

9. WELL NO.
22-29

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface

1980' FNL & 1980' FWL

OCT 06 1986

BUREAU OF LAND MANAGEMENT
FARMINGTON RESOURCE AREA

10. FIELD AND POOL, OR WILDCAT
GALLUP

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
SEC. 29, T20N, R4W

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
6698 GR

12. COUNTY OR PARISH
SANDOVAL

13. STATE
NEW MEXICO

16.

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	☐	PULL OR ALTER CASING	☐
FRACTURE TREAT	☐	MULTIPLE COMPLETE	☐
SHOOT OR ACIDIZE	☐	ABANDON*	☐
REPAIR WELL	☐	CHANGE PLANS	☐
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	☐	REPAIRING WELL	☐
FRACTURE TREATMENT	☐	ALTERING CASING	
SHOOTING OR ACIDIZING		ABANDONMENT*	
(Other) RESTORATION OF LOCATION			XX

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

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 markers and zones pertinent to this work.) *

SURFACE REHABILITATION HAS BEEN PERFORMED ON THIS LOCATION, IT HAS BEEN BACK-FILLED, RECONTOURED AND SEEDED. PLEASE INFORM US OF THE INSPECTION CHECK DATE.

RECEIVED
OCT 29 1986
OIL CON. DIV./
DIST. 3

RECORD

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

SIGNED _____
RUSS IVIE

TITLE DISTRICT SUPERINTENDENT

DATE SEPT. 20, 1986

(This space for Federal or State office use)

OCT 28 1986

APPROVED BY _____

TITLE _____

DATE _____

CONDITIONS OF APPROVAL, IF ANY:

FARMINGTON RESOURCE AREA
FARMINGTON, NEW MEXICO

BY _____

*See Instructions on Reverse Side

NMOCC