Form 3160-5 (November 1983) (Formerly 9-331)	UNITED STAT DEPARTMENT OF THE BUREAU OF LAND MAN.	INTERIOR verse side)	5. LEASE DESIGNATION AND SF-081296	1985 BERIAL NO.
SUN (Do not use this	DRY NOTICES AND REF form for proposals to drill or to deep Use "APPLICATION FOR PERMIT—	PORTS ON WELLS en or plug back to a different reservoir. " for such proposals.)	6. IF INDIAN, ALLOTTEE OR	AMAN SEIST
OIL X CAB	OTHE		7. UNIT AGREEMENT NAME	
2. NAME OF OPERATOR	OTHER		8. FARM OR LEASE NAME	
E. ALEX PHILLIPS			Federal	
3. ADDRESS OF OPERATOR		9. WELL NO.	#2 Gavilan	
	iltower Building, Tulsa seport location clearly and in accordance	10. FIELD AND POOL, OR W	Grnrs-	
See also space 17 belo	DW.)	Gav Mancos/ Gav	Gav Mancos/ Gav Grnhn-Dakota	
	27 FSL and 1846 FEL ction 26-25N-2W	MAR 2 0 1985	11. SBC., T., R., M., OR BLK. SURVEY OR AREA	AMD
500			26-25N-2W, NMP	M Unit J
14. PERMIT NO.	15. BLEVATIONS (Show	BUELAU OF LAND MANAGEMENT	12. COUNTY OR PARISH 18	. STATE
IT. FERRIT NO.	7404 GR		Rio Arriba	New Mexico
16.	Check Appropriate Box To 1	ndicate Nature of Notice, Report, or	Other Data	
N	OTICE OF INTENTION TO:	QUENT REPORT OF:		
TEST WATER SHUT-OF	PCLL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL	\sim
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASIN	•
SHOOT OR ACIDIZE	ABANDON*	BHOOTING OR ACIDIZING	ABANDONMENT [®]	
REPAIR WELL	CHANGE PLANS (Other) (Note: Report results of multiple completion on Well			
(Other) 17. DESCRIBE PROPOSED OR proposed work. If nent to this work.)	well is directionally drilled, give subs	all pertinent details, and give pertinent date surface locations and measured and true verti	pletion Report and Log form.) s, including estimated date of cal depths for all markers and	starting any i sones perti-
emulsion ir tubing stri 7123' in or emulsion br	n the upper zone (Manco ing (Greenhorn-Graneros rder to isolate, treat reaks.	s, it was found that there was completion). We therefore Dakota completion) and set and temporarily produce the	re pulled the long t a Baker RBP at e Mancos until the	
60 days aft	ter having a casinghead	returning this well to its gas connection.		
estable	ished.			
			REGETVE	• •
),	APR 18 1985	
		V V V V V V	OIL CC	e ^c
18. I hereby certify that	the foregoing is true and correct	HOLE Manager of Fich D.	ACCEPTED FOR	REGORD
(This space for Feder	ral or State office use)		MAR 20	
APPROVED BY		ITLE	DATE	
CONDITIONS OF AP	PROVAL, IF ANY:		FARMINGTON RESC BY	
	*See I	nstructions on Reverse Side	J	MTC