Form approved. Budget Bureau No. 1004-0135

Form 3160-5 (November 1983) (Formerly 9-331) DEPARTMENT OF THE INTERIOR verse side) BUREAU OF LAND MANAGEMENT			Expires August 31, 1985 5. LEASE DESIGNATION AND SESIAL NO. NM-23034 6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
SUNDRY NC (Do not use this form for pro) Use "APPLI	7. UNIT AGREEMENT NAME			
OIL GAS WELL OTHER 2. NAME OF OPERATOR	8. FARM OR LEASE NAME			
Sun Exploration and 3. ADDRESS OF OPERATOR	Twilight Zone 9. watt No. 1			
P.O. BOX 5940 TA, Del LOCATION OF WELL (Report location See also space 17 below.) At surface	Gavilan 10. Field and Pool, OR WILDCAT Gavilan 11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA			
1850' FSL & 1850' FEL BUREAU OF LAND MANAGEMENT FARMINGTON RESOURCE AREA 14. FERMIT NO. 15. ELEVATIONS (Show whether by, M. GR, etc.)			Sec. 12-24N-2W 12. COUNTY OR PARISH 13. STATE	
16. Check	Appropriate Box To Indicate	Nature of Notice, Report, or	Rio Arriba Other Data	NM
TEST WATER SHUT-OFF FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent proposed work. If well is directionally drilled, give subsurface location nent to this work.)		water shut-off fracture treatment shooting or acidizing (Other) NTL 4 (Note: Report result	SHOOTING OR ACIDIZING (Other) (NOTE: Report results of multiple completion on Well (Completion or Recompletion Report and Log form.)	
This is a request un	der NTL4A to vent the	e gas on the above ref	ferenced well.	
1. Line has been la	yed. Waiting on cont	cract		
2. Approximate volu				
3. State of New Mex to flare. Pleas	cico Requires a Produc se refer to New Mexico	ction Test, which will o Orders R-6469-D & R-	l require this well -7407-E. DEFE	
		•	OIL CON. I)iV./
			4 3 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	

certify that the foregoing is true and correct TITLE PROR. & PROD. Acctg. Suprv. June 12, 1987 SIGNE (This space for Federal or State office use) TITLE *See Instructions on Reverse Side