| Form 3160-5 (November 1983) (Formerly 9-331) | UNITED STATES DEPARTMENT OF THE IN | SUBMIT Other in verse side | IN TRIPLICATES | Budget Bureau No. 1004-0135 Expires August 31, 1985 LEASE DESIGNATION AND SERIAL NO. |
|--|--|----------------------------|--|---|
| | BUREAU OF LAND MANAG | | 1 | SF 078880 |
| | NDRY NOTICES AND REPO | | | 6. IF INDIAN, ALLOTTEE OR TRIBE NAME |
| 1. | | | l- | 7. UNIT AGREEMENT NAME |
| OIL GAS WELL 2. NAME OF OPERATOR | OTHER | | | Canyon Largo Unit |
| F1 Pas 3. ADDRESS OF OPERAT | o Natural Gas Company | 7 | | Canyon Largo Unit |
| DO Box 4289 Farmington NMR F7400 F V F D 1. Location or well (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1800'N, 840'W JAN 09 1985 BUREAU OF LAND MANAGEMENT | | | | 242 10. FIELD AND POOL, OR WILDCAT |
| | | | | Ballard Pic.Cliffs 11. SBC., T., R., M., OR BLK. AND SURVEY OR AREA |
| 14. PERMIT NO. | 1.4 | MINGLON DECOLOR | TE AREA | Sec. 13, T-25-N, R-7-W NMPM 12, COUNTY OR PARISH 13, STATE |
| 4. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6841 GL | | | | Rio Arriba NM |
| 16. | Check Appropriate Box To Ind | cate Nature of Noti | ce, Report, or Oth | ner Data |
| | NOTICE OF INTENTION TO: | | SUBSEQUEN | T REPORT OF: |
| TEST WATER SHUT FRACTURE TREAT SHOOT OR ACIDIZE REPAIR WELL (Other) EX | PULL OR ALTER CASING MULTIPLE COMPLETE ABANDON* CHANGE PLANS CENSION REQUEST OR COMPLETED OPERATIONS (Clearly state all | SHOOTING (Other) (No | TREATMENT OR ACIDIZING TE: Report results of pletion or Recompleti | ALTERING CASING ABANDONMENT* multiple completion on Well on Report and Log form.) |
| VE | vell is being recommen while some stated that the land of that the try Notice of Internal and Interna | e evalual Lime, no | e the v | vell for 90 days |
| | | | The second secon | JAN 1 0 1935 |
| | | | C | DIL COM. DIV. |
| 18. I hereby contily the | at the recegoing is true and correct | | | APPROVED |
| SIGNED | Davna | r- Producti | on Engineer | AS AMENDED DATE January 8, 1989 |
| (This space for Fe | deral or State office use) | | | JAN 0 9 1985 |
| APPROVED BYCONDITIONS OF A | APPROVAL, IF ANY: | E | | 11. MILLENBACH |
| | | | | AREA MANAGER |

*See Instructions on Reverse Side