UNITED STATES

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells STATE OF THE STATE O		÷
. Name of Operator **PESOURCES** OIL & GAS COMPANY* Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission X Notice of Intent Abandonment Chan Recompletion New Subsequent Report Plugging Back Non- Casing Repair Wate Altering Casing Conv X Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	981	4/4/ 22 PH 1: 35
Name of Operator RESOURCES OIL & GAS COMPANY Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission X Notice of Intent Abandonment Catang Recompletion Subsequent Report Plugging Back Non-Casing Repair Wate Final Abandonment Altering Casing Conv X Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	5.	Lease Number
Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission X Notice of Intent Recompletion Subsequent Report Plugging Back Non- Casing Repair Wate Final Abandonment Altering Casing Conv X Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	Nii 6.	
Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission X Notice of Intent Recompletion Subsequent Report Plugging Back Non- Casing Repair Wate Final Abandonment Altering Casing Conv X Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	7.	Unit Agreement Name
DO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission _X Notice of Intent Abandonment Chan Recompletion New Plugging Back Non Casing Repair Wate Final Abandonment Altering Casing Conv X_ Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.		
DO Box 4289, Farmington, NM 87499 (505) 326-9700 Location of Well, Footage, Sec., T, R, M 1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission X Notice of Intent Abandonment Chan Recompletion New Plugging Back Non- Casing Repair Wate Final Abandonment Altering Casing Conv X Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	8.	
1825' FSL, 1190' FWL, Sec.1, T-26-N, R-4-W, NMPM 2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission _X_ Notice of Intent Abandonment Chan Recompletion New Subsequent Report Plugging Back Non Casing Repair Wate Final Abandonment Altering Casing Conv X_ Other - Tubing repair 3. Describe Proposed or Completed Operations It is intended to repair the tubing on the subject well attached procedure.	9.	Jicarilla 101 #6 API Well No. 30-039-22009
2. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOR Type of Submission Type of Action	10.	Field and Pool
Type of Submission X Notice of Intent Abandonment Recompletion New Subsequent Report Plugging Back Sing Repair Altering Casing Conv X Other - Tubing repair Type of Action Recompletion New Non- Casing Repair Wate Altering Casing Conv X Other - Tubing repair The intended to repair the tubing on the subject well attached procedure.	11.	Blanco Mesaverde County and State Rio Arriba Co, NM
attached procedure.		
ମ୍ବାର ଆଧାର	accordi	ng to the
l)	GE[[
4. I hereby certify that the foregoing is true and correct	[0] [0] [0] [0]	DIV.
igned Manheeld (KLM) Title Regulatory Adminis	trator_D	
This space for Federal Or State Office use) PPROVED BY ONDITION OF APPROVAL, if any: Title	Resources Date	MAY 2 9 1998