

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir,
Use "APPLICATION FOR PERMIT--" for such proposals

SUBMIT IN TRIPLICATE

FORM APPROVED
Budget Bureau No. 4004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No. 14-20-603-1448
6. If Indian, Allottee or Tribe Name Allottee
7. If Unit or CA. Agreement Designation
8. Well Name and No. Central Bisti Unit #53
9. API Well No. 30-045-05558
10. Field and Pool, or Exploratory Area Bisti Lower Gallup
11. County or Parish, State San Juan, New Mexico

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator Giant Exploration & Production Company
3. Address and Telephone No. P.O. Box 2810, Farmington, New Mexico 87499 (505)326-3325
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1979' FNL, 1980' FEL, Section 5, T25N, R12W

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other Acidizing	

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

13. Describe Proposed or Completed Operations (Clearly state all 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.)*

The subject well's perforations (4796' - 4816', 4866' - 4876') were acidized with 1000 gal. 15% HCl on 08/14/95.

RECEIVED
AUG 22 1995
OIL & GAS DIV.
DISTRICT

I hereby certify that the foregoing is true and correct
Signed Paul R. Williams Title Area Engineer Date 70017 1995

(This space for Federal or State office use)
Approved by _____ Title _____ Date _____
Conditions of approval, if any: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any manner within its jurisdiction.

*See Instruction on Reverse Side

ACCEPTED FOR RECORD

AUG 22 1995

FARMINGTON DISTRICT OFFICE
BY WS