

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
NM-36585

6. If Indian, Allottee or Tribe Name

7. If Unit or CA. Agreement Designation

8. Well Name and No.
Andy Williams No.1

9. API Well No.
30-045-87030 21355

10. Field and Pool, or Exploratory Area
Undesignated Gallup

11. County or Parish, State
San Juan, New Mexico

**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

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Central Resources, Inc.

3. Address and Telephone No.
P.O. Box 1247, Bloomfield, New Mexico 87413 (505)-632-3476

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1850' FSL, 2000' FEL, Section 31, T25N, R12W

RECEIVED
OCT 12 1999
OIL CON. DIV.
DIST. 3

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 <u>LTSI</u>	<input type="checkbox"/> Dispose Water

(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.)*

A workover study is in progress for the immediate area of this well. Pending results of the study and result of workover of other nearby wells, this well will have a workover and be returned to production. The study should be completed and the workover procedures evaluated within the next year. Please grant "Long Term Shut In" status for this well until December 1, 2000.

14. I hereby certify that the foregoing is true and correct

Signed Rodney L. Seale Title District Manager Date September 24, 1999

(This space for Federal or State officials)
Approved by WAYNE TOWNSEND Title A.T.L. Date 10-8-99

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