Form 3160-5 (June 1990)

Signed Calla of Other

(This space for Federal or State office use)

UNITED STATES DEPARTMENT OF THE INTERIOR

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

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	Expires	: March	31, 1993	
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BUREAU OF	LAND MANAGEMENT RECE	S. Lease Designation and Serial No.			
CUMPRY NOTICES	10	NO-G-9405-1259			
SUNDRY NOTICES	S AND REPORTS ON WELLS	6. If Indian, Allottee or Tribe Name			
Use "APPLICATION FO	rill or to deepen or reentry to a different reservoir DR PERMIT—" for such proposals				
SUBMI	TIN TRIPLICATE 070 FAIRE	7. If Unit or CA, Agreement Designation			
1. Type of Well	OTO Prairies	ON NM 101802			
Oil Gas Other		8. Well Name and No.			
2. Name of Operator		Gracia Navajo 27 # 1			
Pro NM Energy, Inc. 3. Address and Telephone No.	Santa Fe. NM 87505 505/988-4171	30-045-29894			
460 St. Michael's Dr., # 402	10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey L	Description)	Basin Fruitland Coal			
1850' FNL; 2400' FEL		11. County or Parish, State			
Section 27-T25N-R11W		San Juan County, NM			
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION	N _.			
Notice of Intent	Abandonment	Change of Plans			
चि <u>-</u>	Recompletion	New Construction			
Subsequent Report	Plugging Back Casing Repair	☐ Non-Routine Fracturing ☐ Water Shut-Off			
Final Abandonment Notice	Altering Casing	Conversion to Injection			
	LX Other Spud Notice	Dispose Water (Note: Report results of multiple completion on Well			
13. Describe Proposed or Completed Operations (Clearly state a	Il pertinent details, and give pertinent dates, including estimated date of start	Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled,			
	cal depths for all markers and zones pertinent to this work.)*				
Spudded 12-1/4" hole at 7:30	AM on 4/19/99. Drilling ahead.				
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	DEQ	EWER			
DECENTED TO THE REPORT OF THE PROPERTY OF THE					
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	D Л (6)	ON. DIV.			
DIT. 3					
cc: NIMOCD					
 					
14. I hereby certify that the foregoing is true and correct					

Approved by Conditions of approval, if any: Title

Title Production Technician/Agent