UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry Notices an	d Reports on Wel	ls				
		11 Z 12	5.	Lease Number		
1. Type of Well. GAS	ar en en Vans en en en		6.	SF-079393 If Indian, All. or Tribe Name		
			7.	Unit Agreement Name		
2. Name of Operator		4				
RESOURCES OIL & GAS O	COMPANY MA	200)	8.	San Juan 27-5 Unit Well Name & Number		
3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499	(505) 326-9700		9.	San Juan 27-5 U #599 API Well No. 30-039-22224		
4. Location of Well, Footage, Sec., T, 1640'FSL, 805'FEL, Sec.6, T-27-N, R		Chilippin Children		Field and Pool Blanco MV/Basin DK County and State Rio Arriba Co, NM		
12. CHECK APPROPRIATE BOX TO INDICATE			THER	DATA		
Type of Submission X Not:ce of Intent	Type of Ac Abandonment	tion Change of	f Pla	ans		
F	Recompletion _	New Cons	truc	tion		
	Plugging Back _ Casing Repair	Non-Rout:	ine . it o	Fracturing ff		
Final Abandonment $\overline{}$ A	Altering Casing _ Other - Pay add a	Conversi	on t	o Injection		
13. Describe Proposed or Completed C	Operations					
It is intended to add the Lewis formation of the subject the existing perforation be cleaned out to plug b then be down hole commin submitted.	well by setting s and stimulating ack total depth a	a cast irong the zones. and tubing l	bri The ande	dge plug above well will then ed. The well will		
14. I hereby certify that the forego	oing is true and	correct.				
no no	Title Regulatory	Supervisor		_Date 12/11/00		
(This space for Federal or State Office APPROVED BY CONDITION OF APPROVAL, if any:	ce use) Title	Dat	e _	We Sab		