Form 3160-5 November 1983) Formerly 9-331)

16.

UNITED STATES SUBMIT IN TRIPLICATE* (Other instructions on reverse alde)

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

6. IF INDIAN, ALLOTTER OR TRIBE NAME

NM 013492

SUNDRY	NOTICES AND	REPORTS	ON	WELLS	٦.
not use this form fo	r proposals to drill or	to deepen or plug	back to	a full real type what	U

BUREAU OF LAND MANAGEMENT

	USE "APPLICA"	*	
1.	OIL X CAS OTHER	JAN 1 3 1987	7. UNIT AGBEEMENT NAME West Bisti
2.	NAME OF OPERATOR		/8. FARM OR LEASE NAME
		Chevron U.S.A. Inc. BUREAU OF LAND MANAGEME	NT
3.	ADDRESS OF OPERATOR	FARMINGTON RESOURCE AR	A. WELL NO.
		P. O. Box 599, Denver, Colorado 80201	103
4.	LOCATION OF WELL (Report location cle	early and in accordance with any State requirements.*	10. FIELD AND POOL, OR WILDCAT
	See also space 17 below.) At surface		Bisti Lower Gallup
		660' FSL 660' FEL	11. SEC., T., E., M., OR BLW. AND SURVEY OR AREA
			Sec 18, T26N, R13W
14.	PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE

Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

6312' GL

NOT	ICE OF INTE	NTION TO:		1	SUBSI	EQUENT REPORT	OF:	
					٢	\neg		
TEST WATER SHUT-OFF		PULL OR ALTER CASING			WATER SHUT-OFF		REPAIRING WELL	
FRACTURE TREAT		MULTIPLE COMPLETE			FRACTURE TREATMENT		ALTERING CASING	
SHOOT OR ACIDIZE		ABANDON*			SHOOTING OR ACIDIZING		ABANDONMINT*	
REPAIR WELL		CHANGE PLANS			(Other)			
(Other) Well S	tatus		LX		(Nork: Report resu Completion or Recor	lts of multiple apletion Report	eompletion on Welland Log form.)	ш

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give 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.) *

Chevron U.S.A. Inc. requests a revision of well status from temporarily abandoned to This revision is requested due to time required to evaluate the long-term shut-in. well for future usefulness.

Actions will be undertaken to either permanently plug and abandon or return to active status by year end 1987.



OIL CON. DIV.J

6-BLM 1-J.T. Lisenbee 1-EEM 1-MJM 1-Drlg 1-File

NM

18. I hereby certify that the foregoing is true and correct SIGNED	Office Assistant TITLE <u>Regulatory Affairs</u>	APPROVED DATE January 7, 1987
(This space for Federal or State office use) APPROVED BY CONDITIONS OF APPROVAL, IF ANY:	TITLE	DATE JAN 22 1987
الحيار *Se	e Instructions on Reverse Side	TOWAREA MANAGER FARMINISTON RESOURCE AREA