For (November 1983)	UNITED ST	ATES	SUBMIT IN TRIPLICAT	22p11c0 11dgd31 31 1907
(Tarmo ty 9=331)	DEPARTMENT OF T BUREAU OF LAND A		verse side)	5. LEASE DESIGNATION AND SPEIAL BO. 14-20-603-5019
0111			WELLC	6. IF INDIAN, ALLOTTER OR TRIBE HAME
SUND (Do not use this fo	PRY NOTICES AND FOR PERIOD FOR PE	deepen or plug back	to a different reservoir.	Navajo
1.	UM "APPLICATION FOR PERI	III — for such propos	NB. ;	7. UNIT AGERSMENT NAME
OIL GAB GAB	OTHER			- /
2. NAME OF OPERATOR	0 1.			8. PARM OR LEASE HAME
3. ADDRESS OF OPERATOR	Corporation			9/WBLL NO.
DO DELLIOR	W G Ortez	· Co 81	321	/ 3
4. LOCATION OF WELL (Re See also space 17 below	port location clearly and in account	ordance with any Stat	e requirements.*	10. FIELD AND POOL, OR WILDCAT
At aurface	,			TOCITO Dome Penn I
•	, -			SURVEY OR ARBA
1050' FNL	. 1845' FC	JL		dec 9, T26N, R18W
14. PERMIT NO	i	(Show whether DF, RT,	GR, etc.)	12. COUNTY OR PARISH 18. STATE
	GL: 5			San Juan N. Mex.
16.	Check Appropriate Box	To Indicate Natu	re of Notice, Report, c	or Other Data
No	OTICE OF INTENTION TO:		BUB	BEQUENT REPORT OF:
TEST WATER SHUT-OF	PULL OR ALTER C	ABING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPL	ETE	FRACTURE TREATMENT SHOOTING OR ACIDIZING	ALTERING CABING ABANDONMENT®
RHOOT OR ACIDIZE	ABANDON* CHANGE PLANS		(Other)	
(Other)			(Note: Report res Completion or Rec	oults of multiple completion on Well oupletion Report and Log form.)
17. DESCRIBE PROPOSED OR	COMPLETED OPERATIONS (Clearly	state ali pertinent de	tails, and give pertinent de	ates, including estimated date of starting any rtical depths for all markers and sones perti-
nent to this work.) *				
As of the	is date Mo	bil Oil (Corp has a	completed surface
/ / / :		11.	: 4 . 211	completed surface so per our
restoration	n work on	the sub,	rect well c	b per bur
Sundry N	otice dated	5.28.87	? •	
J				
<7 1				
Z 5 8				
	der in			
चिंह भी				<i>F</i> **
	<u>5</u>			
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西人豐	en e			JUL221987
co ar	± 2.,			C: 22 1987 **
				OIL CON DIV.
	Ma.			Digg.
18. I hereby centify that	the foregoing is true and corre	et O	<i>((((.</i>)	-1000000 000 000 000000 0
SIGNED	oller	TITLE	Staff Up E	DATE DATE
(This space for Fede	ral or State office use)	-		
		mini t		JUN_& 1 1987
CONDITIONS OF AF	PPROVAL, IF ANY:	TITLE		
				FARMINGTON RESOURCE AREA
			D 6.1.	FARMINGTON, NEW MEXICO
		See Instructions o		BY CM
		NM	008	

budget Burns St. 1 1 4-9135