OIL WELL X OTHER  NAME OF OPERATOR  Basin Fuels, Ltd.  ADDRESS OF OPERATOR  P.O. Box 50, Farmington, NM 87499  Location of well (Report location clearly and in accordance with any State requirements.*  See also space 17 below.)  At surface  990' FNL 790 FEL  16. ELEVATIONS (Show whether DF, RT, OR, etc.)  17. County OR PARISH  See 13, T26N, R12W  18. SELEVATIONS (Show whether DF, RT, OR, etc.)  San Juan  NM	Form 3160-5 (November 198. (Formerly 9-33			UNITED RTMENT OF REAU OF LAN	THE	NTERIOR	SUBMIT IN TRIPL (Other instructions verse side)	on re-	Form approved.  Budget Bureau No Expires August 31  5. LEASE DESIGNATION AN NO-G-8501-1077	I, 1985 D SERIAL NO.
Off. Well. Well. Works    Same of overage   Cambington	(Do not						WELLS AL RI	OOM	G. IF INDIAN, ALLOTTER O	R TRIBE NAME
MALL OF OPERATOR  Basin Fuels, Ltd.  ADDRESS OF OFFISTER  P.O. Box 50, Farmington, NM 87499 Lockting or will, (Report location clearly and is accordance with any State requirements.*  P.O. Box 50, Farmington, NM 87499 Lockting or will, (Report location clearly and is accordance with any State requirements.*  P.O. Box 50, Farmington, NM 87499 Lockting or will, (Report location clearly and is accordance with any State requirements.*  P.O. Box 50, Farmington, NM 87499 Lockting or will, (Report location clearly and is accordance with any State requirements.*  P.O. Box 50, Farmington, NM 87499 Lockting or will, (Report location)  II. BELEVATIONS (Show whether or, NT, OR, OL)  Sec. 13, T26N, R12W  Sec. 13, T26N, R12W  Sec. 13, T26N, R12W  Son Juan NM  NM  Check Appropriate Box Io Indicate Nature of Notice, Report, or Other Data  NOTICES OF INTERVIEW TO:  TEST WATER SHOT-OFF  PRACTICE TREAT WATER SHOT-OFF  PRACTICE TREAT TREATMENT  ANNOON'S ACIDIENTS  ANNOON'			Use "APP	LICATION FOR P	ERMIT—"	for such proposa	18.)	11:25		
NAME OF OFERATOR  Basin Fuels, Ltd.  Application of reaction (Report location charity and in accordance with any State requirements.*  P.O. Box 50, Farmington, NM 87499  Location of will. (Report location charity and in accordance with any State requirements.*  See also space 17 below.)  At surface  990' FNL 790 FEL  18. REPATIONS (Show whether Dr. R. OR. etc.)  19. PILL DA AND TOOL, OR WILLIAM  11. SEC. 7, R. A. D. BERC. AND  BURNET OR AREA  San Juan  NM  Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTERVENON TO:  TEST WATER SHOT-OFF  FRACTURE TREAT  MULTIPLE CONFILETE  AANDON*  (Other)  (Other)  Other On Acciding Announces on confilence of Lance Caning  ANNOUNCES. PROFT Testing of Fight of Sec.  (Other)  DESCRIPTION OF ACIDITAL OF PLANS  (Other)  (Other)  Other One of Completion on Well  Completion or Recoupletion on Well  Completion or Recoupletion or Well  Completion or Recoupletion or Recoupletion or Well  Completion or Recoupletion or Recoupletion or Well  Completion or Recoupletion or Recoupletion or Proposed of Fight and of Form.)  The Exercise continues of Completion of Recoupletion or Recoupletion	I. OIL	GAS [	<del></del>			į	69 400 -0 mi			
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Approved  Appropriate Box 1 of the state of						ra Ta	ARMINGTON. HEY	MEXIC	OO. PARM OR DEADS NAME	
P.O. Box 50, Farmington, NM 87499  Locations of well (Report location clearly and in accordance with any State requirements.*  See also appear 17 below.)  At surface 990' FNL 790 FEL  See also appear 17 below.)  Locations of well (Report location clearly and in accordance with any State requirements.*  See also appear 17 below.)  Locations of well (Report location clearly and in accordance with any State requirements.*  See also appear 17 below.)  Locations of well (Report Colification of the property of			Lta.							<del></del>
See also appear 17 below.)  At surface  990' FNL 790 FEL  16. ELEVATIONS (Show whether Dr. N. OR. etc.)  16. ELEVATIONS (Show whether Dr. N. OR. etc.)  17. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  18. ELEVATIONS (Show whether Dr. N. OR. etc.)  19. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  19. ROTICS OF INTENTION TO:  19. TEST WATER SHUT-OFF  TRACTURE TREAT  ANAMODON  NULLIFIER COMPLETE  ANAMODON  CHANGE FLANS  SED JATES  San Juan  NM  MATERIAN WELL  ALTERINO CASINO  ALTERIAN WELL  ALTERIAN WELL  ALTERIAN WELL  CHANGE FLANS  CHANGE FLANS  CHANGE FLANS  CHANGE FLANS  CHANGE FLANS  AARDONN  ARTICLA MAD, FOR ARTICLA MAD  ALTERIAN WELL  ALTERIAN WELL  ALTERIAN WELL  ALTERIAN WELL  ALTERIAN WELL  ALTERIAN WELL  CHANGE FLANS  CHANGE FLANS  CHANGE FLANS  AARDONN  AAR	••		<b></b>	<b>373</b> 4	7.400				J. 17353 NO.	
990' FNL 790 FEL    Fruitland   11. Sec., T. M., OR BEX. AND SERVET OR ABBA   Sec 13, T26N, R12W   Sec 13, T26N, R12W   Sec 13, T26N, R12W   San Juan   NM	A LOCATION OF	WELL IR	port locati			with any State	requirements.*		10. FIELD AND POOL, OR W	VILDCAT
990' FNL 790 FEL  11. SCUTT OF AREA AND 12. COURT OF PARISH 13. STATE San Juan  13. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data  NOTICE OF INTENTION TO:  TEST WATER SHUT-OFF FRACTURE TREAT ARAHDON' (Other)  T. DESCRIPT INDICARD OR COMPLETE OFFRATION (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting and proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and somes pertinent to this work.)  6-23-88 Pumped 35 sx class B cement into casing from 1129' to surface. Left casing full of cement.  8-4-88 Dry hole marker put up.  Dirt work will be done when Napie ly completed.	Sec also space	Sec also space 17 below.) $\leq (-g)/(-g)$						alligos	•	
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