UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SF-078945 I. Type of Well GAS OIL & GAS COMPANY 3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700 4. Location of Well, Footage, Sec., T, R, M 1630'FNL, 1450'FWL, Sec.4, T-29-N, R-7-W, NMPM Type of Submission X Notice of Intent Subsequent Report Submission Plugging Back Casing Repair Abandonment Altering Casing Repair Altering Casing Repair Altering Casing Conversion to Injection Other - 13. Describe Proposed or Completed Operations It is intended to also complete the Pictured Cliffs in the subject well per the approved Application to Drill.			Y Wash
6. If Indian, All. or Tribe Name 7. Unit Agreement Name 2. Name of Operator **RESOURCES*** OIL & GAS COMPANY** 3. Address & Phone No. of Operator **PO Box 4289, Farmington, NM 87499 (505) 326-9700 4. Location of Well, Footage, Sec., T, R, M 1630'FNL, 1450'FNL, Sec. 4, T-29-N, R-7-W, NMPM 1630'FNL, 1450'FNL, Sec. 4, T-29-N, R-7-W, NMPM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Type of Submission **X** Notice of Intent **Abandonment X** Change of Plans **Recompletion Non-Routine Fracturing **Essigned Application to Drill.* 13. Describe Proposed or Completed Operations It is intended to also complete the Fictured Cliffs in the subject well per the approved Application to Drill. 14. I hereby Cartify that the foregoing is true and correct. **Signed Application of State Office use)** **PORT OF THE Number State Of		5.	Lease Number SF-078945
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FARMINGTON DISTRICT OFFICE