NO. OF COPILS RECEIVED			Form C-103
DISTRIBUTION			Supersedes Old C-102 and C-103
SANTA FE	NEW MEXICO OIL CONS	SERVATION COMMISSION	Effective 1-1-65
FILE			
U.S.G.S.			5a. Indicate Type of Lease
LAND OFFICE			State Fee X
OPERATOR			5. State Oil & Gas Lease No.
SLIN	IDRY NOTICES AND REPORTS ON	IWFIIS	
DO NOT USE THIS FORM FOR	IDRY NOTICES AND REPORTS ON PROPOSALS TO DRILL OR TO DEEPEN OR PLUG I ICATION FOR PERMIT = " (FORM C-101) FOR SU	BACK TO A DIFFERENT RESERVOIR. CH PROPOSALS.)	
1.			7. Unit Agreement Name
OIL GAS WELL X	CTHER-		San Juan 30-5 Unit
2. Name of Operator			3. Farm or Lease Name
Northwest Pipeline	Corporation		San Juan 30-5 Unit
3. Address of Operator	GOLDOLACION		9. Well No.
P.O. Box 90, Farmi	ngton N.M. 87499		#95
4. Location of Well	ngeon: w.m. o		10. Field and Pool, or Wildcat
1	1600 FEET FROM THE North	990	Basin Dakota
UNIT LETTER	FEET FROM THE HOLEH	LINE AND FEET FROM	
Esak	30N	5W	
THE EAST LINE, SE	ECTION 28 TOWNSHIP 30N	RANGE DW NMPM	
mmmmm	15. Elevation (Show whether	r DF, RT, GR, etc.)	12. County
	6501' GR	,,,	Ric Arriba
16.			
Chec	ck Appropriate Box To Indicate l		
NOTICE OF	F INTENTION TO:	SUBSEQUEN	T REPORT OF:
PERFORM REMEDIAL WORK	PLUG AND ABANDON	REMEDIAL WORK	ALTERING CASING
TEMPORARILY ABANDON		COMMENCE DRILLING OPNS.	PLUG AND ABANDONMENT
PULL OR ALTER CASING	CHANGE PLANS	CASING TEST AND CEMENT JOB	
		OTHER Extension of A	PD
OTHER			
			in a data of station of a same
17. Describe Proposed or Complete work) SEE RULE 1103.	ed Operations (Clearly state all pertinent de	etails, and give pertinent dates, including	g estimated date of starting any proposed
		- annexal way would like	to request an extension
Due to the inabili	ty to get working interest	t approvat we would like	to request an execusion
of the APD as we d	lo plan to drill this locat	tion facer in the year.	
	· . 1		• <sub>de</sub>
	1)00	CONTRACTOR FOR	
	9)100	auto 30 mg 2 1 1 1	ja.
	7)00		
	7)m		
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18. I hereby certify that the inform	ation above is true and complete to the best	Oll	EAVED & S
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18. I hereby certify that the inform	ation above is true and complete to the best	Oll	COM.  DIST. 5
18. I hereby certify that the inform	ation above is true and complete to the best	Oll	EAVED & S
18. I hereby certify that the inform	ation above is true and complete to the best  TITLE P	Oll	COM.  DIST. 5
18. I hereby certify that the inform	ation above is true and complete to the best	oll t of my knowledge and belief. roduction Clerk	DIST. 5
18. I hereby certify that the inform  SIGNED DOTTING  APPROVED BY	ation above is true and complete to the best  TITLE P	oll t of my knowledge and belief. roduction Clerk	CON  DIST. S
SIGNED DOMMA DOMMA DOMMA	ation above is true and complete to the best true.  TITLE P	oll t of my knowledge and belief. roduction Clerk	DIST. 5
SIGNED DOMANA .	ation above is true and complete to the best true.  TITLE P	oll t of my knowledge and belief. roduction Clerk	DIST. 5