|                                      | _   | TEC   | arıı                      | BMIT, IN TRIPLICATE*              | Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 |                    |  |
|--------------------------------------|---|---|---------------------------|-----------------------------------|--|--------------------|--|
| Form 3160-<br>Tovember<br>Formerly 9 | 1983) DEDART  | UNITED STATES<br>MENT OF THE IN   | THE INTERIOR versus side) |                                   | 5. LEASE DESIGNATION AND SERIAL NO.                                |                    |  |
| Sometry 9                            |   | U OF LAND MANAGE  |                           |                                   | SF 078741  |                    |  |
| (Do                                  | CHNDRY NOT  | ICES AND REPOR  | RTS ON W                  | ELLS<br>different reservoir.      | 6. IF INDIAN, ALLOTTER   | OR TRIBE NAME      |  |
|                                      |   |   | രത്തല                     | าเรเมอก                           | 7. UNIT AGREEMENT NA   |                    |  |
| OIL WELL 2. NAME OF                  | GAS WELL OTHER  | junked Hole   |                           | JEW WALL                          | San Juan 30-<br>8. FARM OR LEASE NAM                               | 6 Unit             |  |
|                                      | Paso Natural Gas  | Company   |                           |                                   | San Juan 30-   | 6 Unit             |  |
| 3. ADDRESS                           | OF OPERATOR   |   |                           |                                   | 9. WELL NO.  |                    |  |
| Box                                  | 4289, Farmingto   | 10. FIELD AND POOL, OR WILDCAT,   |                           |                                   |  |                    |  |
| See also<br>At surf                  | space 17 below.)  | Uniter ignated Basement.  11. SEC., T. R., M., OR BLE. AND SURVEY OR AREA |                           |                                   |  |                    |  |
|                                      |   |   | FE                        | 3 2 9 1984                        | Sec. 26, T-3   |                    |  |
| 14. PERMIT                           | NO.   | 15. ELEVATIONS (Show wh   | FARMINGTO                 | AND MANAGEMENT<br>N RESOURCE AREA | N.M.P.M. 12. COUNTY OR PARISE Rio Arriba                           | New Mex            |  |
|                                      |   |   | sata Natura a             | Notice Report or                  |  |                    |  |
| 16.                                  | Check Appropriate Box To Indicate Nature of Notice, Report, or C  |   |                           |                                   | UENT REPORT OF:  |                    |  |
|                                      |   | <u> </u>  | ¬   "                     | ATER SHUT-OFF                     | BEPAIRING  | WELL               |  |
|                                      | TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT |   |                           |                                   | ALTERING C   | ASING              |  |
|                                      | OR ACIDIZE  | ABANDON*  | _   8                     | HOOTING OR ACIDIZING              | ABANDONMI  | NT*                |  |
|                                      | WELL  | CHANGE PLANS  | - (                       | (Note: Report resul               | ts of multiple completion<br>pletion Report and Log for            | on Well            |  |
| (Other                               |   | PERATIONS (Clearly state all  | pertinent details         | ) I wastename data                | a including estimated de   | to of starting any |  |
| prope                                | osed work. If well is direct to this work.) *   | perations (Clearly state all tionally drilled, give subsurface)           | ace locations and         | measured and true vero            | ical depend for all marks  |                    |  |
| 2 2 1 0 4                            | while the lead hell   | le and drilled in   | to 01d fig                | h at 1685! Wh                     | nile trinning O  | ıt of hole         |  |
| 2-21-84                              | dropped drill s   | Subsequent fi   | shing                     |                                   |  |                    |  |
|                                      | operations - cl   | leaned wellbore o   | ut to 2833                | •                                 | •  | _                  |  |
|                                      | It is intended  | to plug and aban  | don this w                | ellbore as foll                   | lows:  |                    |  |
|                                      | Spot a 1500 cu. ft. cement plug from T. D. to approximately 2600'. Tag top of plug with wireline.           |   |                           |                                   |  |                    |  |
|                                      | Load hole with mud. Spot a 515 cu. ft. cement plug from 630' to surface.                                    |   |                           |                                   |  |                    |  |
|                                      | Set dry hole marker.  |   |                           |                                   |  |                    |  |
|                                      |   |   |                           | DEGE                              | INEW   |                    |  |
|                                      |   |   |                           |                                   |  |                    |  |
|                                      |   | MAR 05 1984   |                           |                                   |  |                    |  |
|                                      |   |   |                           |                                   |  |                    |  |
|                                      | 1   |   |                           | OIL CON<br>DIST.                  |  |                    |  |
|                                      |   |   |                           |                                   |  |                    |  |
|                                      |   |   |                           |                                   | APPROVED   |                    |  |
| 18. I here                           | by certify that the toregoing   | is true and correct   |                           |                                   |  | 1                  |  |
| SIGNE                                | sp MU ()  | TIT   | LE Pet                    | roleum Enginee                    | r DATE   | 2-29-84            |  |
| (This                                | apace for Federal or State  | office use)   |                           |                                   | ECD o 10   |                    |  |

\*See Instructions on Reverse Side

AREA MANAGER FARMINGTON RESOURCE AREA

TITLE \_