UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Sundry	Notices and Reports on Wells		
		, . 5.	Lease Number SF-077092
Type of Well	(6.	If Indian, All. Tribe Name
GAS	F.C.s.	2000	Unit Agreement N
Name of Operator		5 m	-
RESOURCES (OIL & GAS COMPANY		
		8.	Well Name & Numb Lackey A #3A
Address & Phone No. of Op	perator	9.	API Well No.
PO Box 4289, Farmington,	NM 87499 (505) 326-9700	٦.	30-045-29763
S 22-11 Bookses	Cod T P M	10	Field and Pool
Location of Well, Footage 1010'FSL, 995'FEL, Sec.11	T. Sec., T, K, M	10.	Blanco Mesaverde
1010'FSL, 995'FEL, Sec.11	L, 1-29-N, R-10-W, NHEM	11.	County and State
			San Juan Co, NM
. CHECK APPROPRIATE BOX TO	INDICATE NATURE OF NOTICE,	REPORT, OTHER	DATA
Type of Submission	Type of Act		
Notice of Intent	Abandonment	$_$ Change of Pl	
	Recompletion	_ New Construc	
X Subsequent Report		_ Non-Routine	_
	Casing Repair	_ Water Shut o	
Final Abandonment		_ Conversion t	o Injection
Final Abandonmen	t Altering Casing _X_ Other -	_ Conversion t	o injection
	X Other -	_ Conversion t	o Injection
. Describe Proposed or	X Other -	_ Conversion t	o injection
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	X Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or (_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or (_X_ Other -		
. Describe Proposed or (_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or	_X_ Other -		
. Describe Proposed or (_X_ Other -		
. Describe Proposed or 0	_X_ Other - Completed Operations GR-CCL @ 5051-surface. TOC o	on 4 ½″ csg @ s	
. Describe Proposed or 0	_X_ Other -	on 4 ½″ csg @ s	
Describe Proposed or 0 2-15-00 RU. Ran CBL-0	_X_ Other - Completed Operations GR-CCL @ 5051-surface. TOC o	n 4 ½" csg @ s	Surface. RD.
Describe Proposed or 0 2-15-00 RU. Ran CBL-0 4. I hereby certify that	X_ Other - Completed Operations GR-CCL @ 5051-surface. TOC of the foregoing is true and of the fittle Regulatory Administrations.	n 4 ½" csg @ s	Surface. RD.
Describe Proposed or 0 2-15-00 RU. Ran CBL-0 4. I hereby certify that	X_ Other - Completed Operations GR-CCL @ 5051-surface. TOC of the foregoing is true and of the for	on 4 %" csg @ s	Surface. RD.
Describe Proposed or 0 2-15-00 RU. Ran CBL-0 1. I hereby certify that	X_ Other - Completed Operations GR-CCL @ 5051-surface. TOC o the foregoing is true and o Title Regulatory Adr State Office use) Title	n 4 ½" csg @ s	Surface. RD.