

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT-" for such proposals

SUBMIT IN TRIPLICATE

RECEIVED
DEC 7 1992
OIL CON. DIV.
DIST. 3

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

5. Lease Designation and Serial No.

SF-081226

6. If Indian, Allottee or Tribe Name

Federal

7. If Unit or CA, Agreement Designation

Horseshoe Gallup Unit

8. Well Name and No.

Horseshoe Gallup Unit #255

9. API Well No.

3004509837

10. Field and Pool, or Exploratory Area

Horseshoe Gallup

11. County or Parish, State

San Juan, New Mexico

1. Type of Well

Oil Gas Other

2. Name of Operator

Vantage Point Operating Company

3. Address and Telephone No.

2401 Fountain View Dr., Suite 700, Houston, TX 77057 713-780-1952

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

760' FSL & 560' FEL Sec.4-T30N-R16W

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

Notice of Intent

Subsequent Report

Final Abandonment Notice

Abandonment

Recompletion

Plugging Back

Casing Repair

Altering Casing

Other LTSI

Change of Plans

New Construction

Non-Routine Fracturing

Water Shut-Off

Conversion to Injection

Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Vantage Point Operating Co. hereby requests approval for extension of long term shut-in status on this well. Extension of LTSI status would keep this wellbore available for future projects and would eliminate economic waste and promote conservation.

THIS APPROVAL EXPIRES SEP 01 1993

14. I hereby certify that the foregoing is true and correct

Signed Theresa Overcup

Title Engineering Technician

Date 11/4/92

APPROVED

This space for Federal or State office use)

Approved by _____
Conditions of approval, if any:

Title _____

Date _____

DEC 03 1992
AREA MANAGER