

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Taurus Exploration, U.S.A., Inc.

3. Address and Telephone No.
2198 Bloomfield Highway; Farmington, NM 87401

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1711' FSL, 1295' FEL, Sec. 25, T32N, R6W, NMPM

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OIL CON. DIV.
DIST. 3

5. Lease Designation and Serial No.
SF-081181

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
San Juan 32-5 Unit

8. Well Name and No.
San Juan 32-5 Unit 13M

9. API Well No.
30-039-25878

10. Field and Pool, or exploratory Area
Blanco Mesaverde/Basin
Dakota

11. County or Parish, State
Rio Arriba NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input checked="" type="checkbox"/> Other <u>Single Completion</u>	<input type="checkbox"/> 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.)*

This well was not approved as a commingle well. This was completed as a single Dakota well.

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

Signed M. J. J. Taylor

Title Production Assistant

Date 10/16/98

(This space for Federal or State office use)

Approved by

Title

Conditions of approval, if any:

ACCEPTED FOR RECORD

NOV 03 1998

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON DISTRICT OFFICE

* See Instruction on Reverse Side

BY

NMOC