

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

| | |
|---|--|
| 1. Type of Well <input checked="" type="checkbox"/> Oil <input type="checkbox"/> Gas <input type="checkbox"/> Other | 5. Lease Number 14-20-604-1950 |
| 2. Name of Operator Vantage Point Operating Company | 6. If Indian, Allottee or Tribe name Ute |
| 3. Address & Phone No. of Operator 2401 Fountain View Drive Suite 700 Houston, TX 77057-4862 (713) 780-1952 | 7. Unit Agreement Name Horseshoe Gallup |
| 4. Location of Well, Footage, Sec., T, R, M K-35-31N-16W 1875' FSL & 2010' FWL | 8. Well Name & Number HGU #206 |
| | 9. API Well No. 30-045-10106 |
| | 10. Field and Pool Horseshoe Gallup |
| | 11. County and State San Juan, New Mexico |

RECEIVED
AUG 12 1994
OIL CON. DIV.
DIST. 3

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

| Type of Submission | Type of Action |
|--|--|
| <input checked="" type="checkbox"/> Notice of Intent | <input type="checkbox"/> Abandonment <input type="checkbox"/> Change of Plans |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Recompletion <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment | <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"/> Conv. to Injection |
| | <input type="checkbox"/> Dispose Water |
| | <input checked="" type="checkbox"/> Other - LTSI |

13. Describe Proposed or Completed Operations

This well is currently shut-in.
Vantage is requesting LTSI status from the BLM until such time it is economically feasible to return this well to production.

RECEIVED
BLM
94 JUL 22 PM 2:23
070 FARMINGTON, NM

THIS APPROVAL EXPIRES AUG 01 1995

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

Signed Dianna K. Fairhurst Title Consulting Engineer Date 7/13/1994
Dianna K. Fairhurst

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: _____

APPROVED

AUG 08 1994
for DISTRICT MANAGER

NMOCD