Form 3160-5 lovember 1983) Formerly 9-331)

TEST WATER SHUT-OFF

FRACTURE TREAT

UNITED STATES SUBMIT IN TRIPLICATES OCHOR 10 ACTOR (Other Instructions on re-

NOTICE OF INTENTION TO:

PULL OR ALTER CASING

MULTIPLE COMPLETE

Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND BREIAL NO.

REPAIRING WELL

ALTERING CARING

BUREAU OF LAND MANAGEMENT RECEIV			EDNM-003187	
SUNDRY NOTICES AND REPORTS ON WELLS (Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.			6. IP INDIAN, ALLOTTER	
OIL XX GAR OTHER	03		7. OHIT AGREEMENT HA	
2. HAME OF CPERATOR KOCH EXPLORATION COMPANY			S. PARK OR LEASE HAME	
3. ADDRESS OF OPERATOR 3605 N.DUSTIN, FARMINGTON, NEW MEXICO 87401			9. WBLL NO.	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface 1180 FSL & 1485 FEL		BLANCO MESA VERDE 11. SEC. 7. 2. W. OR RES. AND 20-31N-10W		
14. PERMIT NO.	GR-6096 KB-6108		SAN JUAN	NM.
16. Check Appro	opriate Box To Indicate Nature of Not	ice, Report, or C	Other Data	•

ABANDONMENT[®] SHOOT OIL ACIDIZE ABANDON* BROOTING OR ACIDIZING REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

WATER SHUT-OFF

This well has a 970'tubing fish in the bottom of the hole. (left at time of completion.)

17. 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 sones pertinent to this work.) *

We plan to wash over and retrieve the tubing fish. Clean out hole to TD. We need to dig a blow pit ,10'X 20' on existing location. We will be using gas and a mist of water to clean the hole. The gas we use will be metered.

> RECEIVED
> JULI 2 1991. OIL CON. DIV. DIST. 3

SCHEGODNY ESPORT OF :

	The state of the s		
	APPROVED		
18. I hereby certify that the foregoing is true and correct			
SIGNED Delver of Echard TITLE Dist. Prod. Supt.	June 17,199	_	
(This space for Federal or State office use)		_	
	DATE 1 0 1001		
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:		-	
	PARAMANANA 1		
	AMA MANAGER	1	
*See Instructions on Reverse Side	FARMINGTON PERSOURCE AREA	>	
TAMOCO	A CONTRACTOR OF THE PROPERTY O		