

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side.)

Form approved
Budget Bureau No. 1004-5
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL

NMSF078464

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.
Use "APPLICATION FOR PERMIT" for such proposals.)

1. OIL WELL ☐ GAS WELL ☒ OTHER

2. NAME OF OPERATOR

Hallwood Petroleum, Inc.

3. ADDRESS OF OPERATOR

P.O. Box 378111 Denver, CO 80237

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.
See also space 17 below.)
At surface

940' FSL & 1690' FWL

RECEIVED
JAN 3 1993
OIL CON. DIV.

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Senter

9. WELL NO.

3

10. FIELD AND POOL OR WILDCAT

Undes. Fruitland Sand

11. SEC., T., R., M., OR BLK. AND
SURVEY OR AREA

Sec 24-T31N-R13W

12. COUNTY OR PARISH 13. STATE

San Juan

NM

14. PERMIT NO.

15. ELEVATIONS (Show whether on W. or etc.)

OIL CON. DIV.

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF

PULL OR ALTER CASING

FRACTURE TREAT

MULTIPLE COMPLETION

SHOOT OR ACIDIZE

ABANDON*

REPAIR WELL

CHANGE PLANS

(Other) Long Term Shut-In

X

SUBSEQUENT REPORT OF:

WATER SHUT-OFF

FRACTURE TREATMENT

SHOOTING OR ACIDIZING

(Other)

REPAIRING WELL

ALTERING CASING

ABANDONMENT*

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

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 zones perti-
nent to this work.)*

Hallwood Petroleum, Inc. hereby request long term shut-in status for the above
mentioned well. The following criteria are applicable to this well:

- 1) The well is unable to produce.
- 2) The well is unable to produce in paying quantities
- 3) The well will not produce into line pressure.
- 4) Time is required to evaluate the technical, geological, and economic merits
of the well for usefulness.

The four criteria above satisfy five of your stated condition on the attached
"General Requirements."

THIS APPROVAL EXPIRES JAN 1 1993

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

SIGNED

Debi Sheely

TITLE Sr. Engineering Technician

DATE December 12, 1991

(This space for Federal or State office use)

APPROVED BY

TITLE

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

1000

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