Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135

Expires: March 31, 1993 BUREAU OF LAND MANAGEMENT 5. Lease Designation and Serial No. SF-078272-A *
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 reentry to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals 7. If Unit or CA, Agreement Designation SUBMIT IN TRIPLICATE I. Type of Well Oil Gas Well Other 8. Well Name and No. 2. Name of Operator CAMP #1 BCO, INC. . 9. API Well No. 3. Address and Telephone No. 30-039-25353 · 135 GRANT, SANTA FE, NM 87501 505 983-1228 • 10. Field and Pool, or Exploratory Area 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) LYBROOK GALLUP . 885' FSL & 1625' FEL, NMPM · 11. County or Parish, State SW/4 OF THE SE/4 (0). RIO ARRIBA, NM . S10-T23N-R7W . CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion **New Construction** Subsequent Report Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Final Abandonment Notice Altering Casing Conversion to Injection X Other Surface Restoration Dispose Water (Note: Report results of multiple completion on Well & Reseeding . 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.)* Surface restoration has been completed. The reseeding was completed the week of August 22 - 26, 1994. The contractor who did the restoration & reseeding was Robert E. Ramirez of Cuba, New Mexico. -14. I hereby certify that the foregoing is true and correct ACCEPTED FOR PECOND President SEP 01 1994 Title

Approved by ______ Conditions of approval, if any:

FARMINGIUN DISTRICT OFFICE