

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE\*  
(Other instructions on re-  
verse side)

Budget Bureau No. 1004-0135  
Expires August 31, 1985

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 <input checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>	7. UNIT AGREEMENT NAME
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
BCO, INC. *	FEDERAL B *
3. ADDRESS OF OPERATOR	9. WELL NO.
135 GRANT, SANTA FE, NEW MEXICO 87501 *	11
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface	10. FIELD AND POOL, OR WILDCAT
2200' FSL - 2090' FEL *	LYBROOK GALLUP *
14. PERMIT NO.	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
15. ELEVATIONS (Show whether DF, RT, GR, etc.)	SEC 22 T23N R7W NMPM
GL: 7222'.	12. COUNTY OR PARISH 13. STATE
	SANDOVAL * NEW MEXICO

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

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	<input type="checkbox"/>	PULL OR ALTER CASING	<input type="checkbox"/>
FRACTURE TREAT	<input type="checkbox"/>	MULTIPLE COMPLETE	<input type="checkbox"/>
SHOOT OR ACIDIZE	<input type="checkbox"/>	ABANDON*	<input type="checkbox"/>
REPAIR WELL	<input type="checkbox"/>	CHANGE PLANS	<input type="checkbox"/>
(Other) CORRECTION OF APD	<input type="checkbox"/>		<input checked="" type="checkbox"/>

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	<input type="checkbox"/>	REPAIRING WELL	<input type="checkbox"/>
FRACTURE TREATMENT	<input type="checkbox"/>	ALTERING CASING	<input type="checkbox"/>
SHOOTING OR ACIDIZING	<input type="checkbox"/>	ABANDONMENT*	<input type="checkbox"/>
(Other)	<input type="checkbox"/>		<input type="checkbox"/>

(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 pertinent to this work.) \*

An error appears in Box #11 of previously submitted form 3160-3 "Application for Permit to Drill."

Box #11 submitted as: NW/4 SW/4  
Sec 22 T23N R7W

It should read: NW/4 SE/4  
Sec 22 T23N R7W

All footages given and plats submitted were correct.

RECEIVED  
FEB 13 1992  
OIL CON. DIV.  
DIST. 3

RECEIVED  
BLM MAIL ROOM  
92 FEB 11 AM 11:47  
FARMINGTON RESOURCE AREA  
FARMINGTON, NEW MEXICO

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

SIGNED [Signature] TITLE PETROLEUM ENGINEER

(This space for Federal or State office use)

APPROVED BY \_\_\_\_\_ TITLE \_\_\_\_\_  
CONDITIONS OF APPROVAL, IF ANY:

ACCEPTED FOR RECORD

FEB 12 1992  
DATE

FARMINGTON RESOURCE AREA

BY [Signature]