Form 3160-5	UNITED STATES SUBMIT IN TRIPLICATES (Other instructions on re-			Bud Evo	Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL NO. SF-080136		
(November 1983) (Formerly 9-331)	DEPARTMENT OF	DEPARTMENT OF THE INTERIOR (Other Instructions on Fe-					
SUN (Do not use this	DRY NOTICES AN	D REPORTS O	N WELLS the to a different reservoir.	6. IF IND	AN, ALLOTTEE OR T	RIDE NAME	
I. OIL GAB T					7. UNIT AGREEMENT NAME		
WELL WELL (A) OTHER 2. NAME OF OPERATOR					8. FARM OR LEASE NAME		
Curtis J. Little					Salazar		
3. ADDRESS OF OPERATOR P.O. Box 1258 Farmington, NM 87499							
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.)					10. FIELD AND POOL, OR WILDCAT		
1800' FNL & 1010' FEL JAN 181965				11. ssc.,	Otero Chacra/S. Blanco PC 11. SBC., T., R., M., OR BLE. AND BURNEY OR AREA		
			AU OF LAND MANAGEM	REA Sec.	22-T25N-R	6W	
14. PERMIT NO.	15. ELEVATI	ONS (Show whether DF, I	rr, GR, etc.)	12. COUNT	TY OR PARISH 13.	STATE	
30-039-23514		6371' GR		Rio	ARriba	<u>NM</u>	
16.	Check Appropriate B	lox To Indicate No	ture of Notice, Report, o	or Other Date	1		
	MOTICE OF INTENTION TO:				UBNT REPORT OF:		
TEST WATER SHUT-0	PULL OR ALTE	R CASING	WATER SHUT-OFF	${x}$	REPAIRING WELL ALTERING CASING		
FRACTURE TREAT	MULTIPLE COM	PLETE	FRACTURE TREATMENT SHOOTING OR ACIDIZING	$\left \frac{X}{X}\right $	ABANDONMENT*		
SHOOT OR ACIDIZE REPAIR WELL	CHANGE PLANS		(Other)				
(Other)			Completion or Reco	ompletion Repor			
17. DESCRIBE PROPOSED 0 proposed work. If nent to this work.)	R COMPLETED OPERATIONS (Clear well is directionally drilled,	orly state all pertinent give subsurface location	details, and give pertinent us ns and measured and true ve	rtical depths fo	r all markers and	sones perti-	
3268, 3270	2810, 2832, 2838 0. 3272, 3274, 327 /52,000 gal. 70% ATP 2800 psi.	76, 3278. Ac	idized w/1000 ga 54.500 lbs. 20/4	l. 15% HC 40 sand,	L. BDP 1, & 717, 601	SCF	
1/11/85: Set 2342, 234 2444, (15	bridge plug at 4, 2346, 2348, 239 holes). Acidized quality foam, 42 PM, ISIP 1800 psi	2510'. Teste 50, 2352, 235 d w/500 gal. .000 lb. 12/20	d to 3000 psi; he 4, 2356, 2358, 230 15% HCL. BDP 2 D sand & 425,600	eld OK. 60, 2362, 2400 psi. SCF Nitr	Perf Pictur 2364, 2421 Fraced w ogen. ATP	ed Cliffs , 2427, /32,000	
					PEGE! APR 091	4 2 4 1	
				 -	DIL CON. DIST. 3	DIV.	
18. I hereby certify that	the foregoing is true and co	rrect			1/15/85		
SIGNED 7	tis Luile	TITLE	Operator	POEDTED PA		 	
	eral or State office use)			,∖,Er≀EV F	UN NEUUNU		
APPROVED BY		TITLE		— FEB P	(): 1985 —		
CONDITIONS OF A	PPROVAL, IF ANY:		F	_	ESOUNCE AKEA		
		*See Instructions	DV	~مر			
		See Instructions	OIL IVEREISE DICE				
