UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

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.)

5. LEASE DESIGNATION AND SERIAL NO.: NM 23034
6. IF INDIAN, ALLOTTEE OR TRIBE NAME:
7. UNIT AGREEMENT NAME:

1. OIL WELL [X] GAS WELL [ ] OTHER
2. NAME OF OPERATOR: Oryx Energy Company
8. FARM OR LEASE NAME: Twilight Zone (BPO)
3. ADDRESS OF OPERATOR: P. O. Box 1861, Midland, Texas 79702
9. WELL NO.: 1
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: J, 1850' FSL & 1850' FEL
10. FIELD AND POOL, OR WILDCAT: Gavilan Mancos
11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: 12, T-24-N, R-2-W
14. PERMIT NO.
15. ELEVATIONS (Show whether DF, RT, GR, etc.)
12. COUNTY OR PARISH: Rio Arriba
13. STATE: Texas

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

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT OFF	PULL OR ALTER CASING	WATER SHUT OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other) Well SI	X
(Other)			

(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.)*

This well is shut-in pending evaluation for a workover. Oryx requests approval to keep well shut-in until evaluation is done.

RECEIVED
MAR 29 1991
OIL CON. DIV.
DIST. 3

SEP 01 1991

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
91 MAR 11 PM 2:23
FARMINGTON, N.M.
RECEIVED

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

SIGNED _____ TITLE Proration Analyst DATE 3-7-91

(This space for Federal or State office use)

APPROVED
DATE 3-7-91

APPROVED BY _____ TITLE _____ DATE MAR 20 1991

CONDITIONS OF APPROVAL, IF ANY:

FOR AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.