

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

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 Form 3160-3 for such proposals.)

5. Lease Designation and Serial No.

NMNM 18323

6. If Indian, Allottee or tribe Name

7. If Unit or CA, Agreement Number

8. Well Name and No.

29-4 CARSON 24 # 1

9. API Well No.

30-039-24821

10. Field and Pool, or Exploratory Area

BASIN FRUITLAND COAL GAS POOL

11. County or Parish, State

RIO ARRIBA County, New Mexico

1. Type of Well

GAS WELL

2. Name of Operator

FALCON SEABOARD OIL COMPANY

3. Address and Telephone Number

(505) 327-7259

c/o DAVE SIMMONS, BOX 48, FARMINGTON, NM 87499

4. Location of Well (Sec. T., R., M., or Survey Description)

840' FSL and 1065' FWL

Sec 24, T29N, R4W

RECEIVED
JUL 11 1994

OIL CON. DIV.

DIST. 3

12. CHECK APPROPRIATE BOX(es) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- ☐ Abandonment
☐ Recompletion
☐ Plugging Back
☐ Casing Repair
☐ Altering Casing
☒ Other RETURN TO PRODUCTION
☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut-Off
☐ Conversion to Injection
☐ Disposal Water

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

13. Describe Proposed Completion Operations (Clearly state all pertinent details, and give pertinent dates, including estimated starting and 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.)*

OPERATOR PLANS ON RETURNING THE WELL TO PRODUCTION WITHIN 90 DAYS
PENDING THE COMPLETION OF PIPELINE WORK AND A SIGNED AGREEMENT WITH WILLIAMS FIELD SERVICE.
OPERATOR WILL NOTIFY BLM OF DATE OF RETURN TO PRODUCTION.

THIS APPROVAL EXPIRES NOV 01 1994

U.S. DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
FARMINGTON, NEW MEXICO

NOTE: This format is Issued in lieu of U.S. BLM Form 3160-5

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

SIGNED

R. D. SIMMONS

TITLE AGENT

DATE: 07/06/94

(This space for Federal or State office use.)

APPROVED BY

TITLE

DATE:

CONDITIONS OF APPROVAL, IF ANY

APPROVED

JUL 07 1994

for DISTRICT MANAGER