Form 3160-5 (November 1983) (Formerly 9-331)	UNITED STATI DEPARTMENT OF THE BUREAU OF LAND MANA	INTERIOR (Other Instructions	5. LEASE DESIGNATION AND SERIAL NO. NM 012573
SUNDR (Do not use this for	Y NOTICES AND REP of proposals to drill or to deep mapplication for permit—	ORTS ON WELLS en or plug back to a different reservoir. for such prospetate.	6. IF INDIAN, ALLOTTES OR TRIBE NAME
i.			7. UNIT AGREEMENT HAME
ABIT CYB	OTESE	APR 1 0 1987	San Juan 30-6 Unit
2. NAME OF OPERATOR		W N I 0 1337	8. FARM OR LEASE NAME
	idian Oil Inc.	BUREAU OF LAND MANAGEME	San Juan 30-6 Unit
3. ADDRESS OF OPERATOR		FARMINGTON RESOURCE ARE	
Pos	st Office Box 4289 relocation clearly and in accordance	,Farmington,NM 87499	400
See also space 17 below.)		e with any State requirements.	10. FIELD AND POOL, OR WILDCAT
At surface 30()'s, 990'W		Undes.Fruitland
			SURVEY OR ARMA
			Sec.14,T-30-N,R-7 -
14. PERMIT NO.	15. SLEVATIONS (Show	whether of, ST, GR, etc.)	N.M.P.M. 12. COUNTY OR PARISE 13. STATE
		6266'GL	Rio Arriba NM
16.	C		
10.	Check Appropriate Box to ti	ndicate Nature of Notice, Report	, or Other Data
NOTIC	CB OF INTENTION TO:		UBSEQUENT REPORT OF:
TEST WATER SEUT-OFF	PCLL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
FRACTURE TREAT	MULTIPLE COMPLETE	PRACTURE TREATMENT	ALTERING CABING
SHOOT OR ACIDIZE	ABANDON®	SHOOTING OR ACIDIZIN	IG ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	
(Other)		Completion or R	results of multiple completion on Well ecompletion Report and Log form.)
17. DESCRIBE PROPOSED OR COM- proposed work. If wel- nent to this work.) *	(PLETED OPERATIONS Clearly state of is directionally drilled, give subst	ill pertinent details, and give pertinent arface locations and measured and true	dates, including estimated date of starting an vertical depths for all markers and sones perticularly starting and sones perticularly starting and sones perticularly starting and sones perticularly starting and sones per
09-01-86	Loaded tubing wit	h 20 bbls.water. Pu	imped casing-tubing
			og. w/20 bbls. water.
			ater. Put well on line.
			MRA
			PEGELVED
			S S S S S S S S S S S S S S S S S S S



18. I hereby certify that the foregoing is true and correct SIGNED	TITLE Drilling Engr.	DATE 04-07-87
(This space for Federal or State office use)		
APPROVED BY	TITLE	· DATE
		End appearance of some MARA
•s.	re Instructions on Reverse Side	Ego Smn

*See Instructions on Reverse Side