

Form 3160-5
(June 1990)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993	
2. Name of Operator Raymond T. Duncan		5. Lease Designation and Serial No. 14-20-0603-10009	
3. Address and Telephone No. P. O. Box 420, Farmington, NM 87499 (505) 325-1821		6. If Indian, Allottee or Tribe Name Navajo Tribal	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1810' FNL - 330' FWL Sec. 7, T29N, R16W, NMPM		7. If Unit or CA, Agreement Designation	
		8. Well Name and No. North Hogback 7#3	
		9. API Well No.	
		10. Field and Pool, or Exploratory Area Slickrock Dakota	
		11. County or Parish, State San Juan, NM	

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other Long-term shut-in
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

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

13. 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.)*

Request long term shut-in because this well is unable to produce in paying quantities.

THIS APPROVAL EXPIRES NOV 09 1992

I hereby certify that the foregoing is true and correct.			
Signed <u>Raymond T. Duncan</u>	Title <u>Agent</u>	Date <u>11-9-91</u>	
(This space for Federal or State office use)			
Approved by _____	Title _____	Date <u>DEC 03 1991</u>	
Conditions of approval, if any:			

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.

*See Instruction on Reverse Side