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

5. Lease Designation and Serial No.

14-20-600-3531

6. If Indian, Allottee or Tribe Name

Navajo

7. If Unit or CA. Agreement Designation

Horseshoe Gallup

8. Well Name and No.

Horseshoe Gallup Unit #104

9. API Well No.

30-045-10558

10. Field and Pool, or Exploratory Area

Horseshoe Gallup

11. County or Parish, State

San Juan Co., New Mexico

1. Type of Well

[X] Oil Well   [ ] Gas Well   [ ] Other

2. Name of Operator

Central Resources, Inc. c/o PLAYA Minerals & Energy, Inc.

3. Address and Telephone No.   (281) 931-3800

650 North Sam Houston Pkwy. East, Suite 500, Houston, TX 77060

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

660' FEL, 1980' FSL, Sec. 19 T31N R16W

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

TYPE OF SUBMISSION	TYPE OF ACTION	
[ ] Notice of Intent	[ ] Abandonment	[ ] Change of Plans
	[ ] Recompletion	[ ] New Construction
[ ] Subsequent Report	[ ] Plugging Back	[ ] Non-Routine Fracturing
	[ ] Casing Repair	[ ] Water Shut-Off
[ ] Final Abandonment Notice	[ ] Altering Casing	[ ] Conversion to Injection
	[X] Other __Reactivation__	[ ] Dispose Water

(Note: Report results of multiple completion on ...
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.)*

Well restored to production on September 23, 1999.

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

Signed _____   Title _Regulatory & Environmental_   Date _10/8/99_

(This space for Federal or State office use)

Approved by _____   Title _____   Date _____
Conditions of approval, if any:

ACCEPTED FOR RECORD

*See Instruction on Reverse Side