Form 3160-5

**UNITED STATES** 

FORM APPROVED

| (June, 1990)   | DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS |  |             |   |                                     | Budget f   | Budget Bureau No. 1004-0135             |                                       |          |  |
|--|--|--|-------------|---|-------------------------------------|--|---|---------------------------------------|----------|--|
|  |  |  |             |   |                                     | Expires: March 31, 1993  5. Lease Designation and Serial No. |   |                                       |          |  |
|  |  |  |             |   |                                     |  |   |                                       |          |  |
|  |  |  |             |   |                                     | 14-20-603-2022   |   |                                       |          |  |
|  | Do not use this form for p   | n or reentry to a different reservoir. | r.          |   | 6. If Indian, Allotte or Tribe Name |  |   |                                       |          |  |
|  | Use "APPLICATION FOR PERMIT" for such proposals  |  |             |   |                                     | Navajo   |   |                                       |          |  |
| SUBMIT IN TRIPLICATE   |  |  |             |   |                                     | 7. If Unit or CA, Agreement Designation                      |   |                                       |          |  |
| 1. Type of Well  |  |  |             |   |                                     | Horseshoe Gallup Unit  |   |                                       |          |  |
|  | X Oil Well   | Gas Well                               |             | Other   |                                     | 8. Well Name a   | nd No.                                  |                                       |          |  |
| 2. Name of Operator  |  |  |             |   |                                     | HSGU #90   |   |                                       |          |  |
| CENTRAL RESOURCES, INC.  |  |  |             |   |                                     | 9. API Well No.  |   |                                       |          |  |
| 3. Address and Telephone No.   |  |  |             |   |                                     |  | 30-045-10631                            |                                       |          |  |
| 1775 Sherman Street Suite 2600 Denver, CO 80203-4313 303-830-0100  |  |  |             |   |                                     |  | 10. Field and Pool, or Exploratory Area |                                       |          |  |
| 4. Location of Well (Footage, T, R, M, or Survey Description)  |  |  |             |   |                                     | Horseshoe Gallup   |   |                                       |          |  |
| 1972' FNL & 736' FWL   |  |  |             |   |                                     | 11. County or Parish, State                                  |   |                                       |          |  |
| Sec. 24-T31N-R17W  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER   |  |  |             |   |                                     | San Juan County, New Mexico                                  |   |                                       |          |  |
| 12.  |  | BOX(s) TO INDICAT                      | TEN         |   | ER D                                | DATA   |   |                                       |          |  |
| OF SUBMI   | ISSION   | <del> </del>                           | 1           | TYPE OF ACTION  |                                     | Τ  |   |                                       |          |  |
| Г  | <del></del>  |  |             | Abandonment   |                                     | Change of Plan   |   |                                       |          |  |
| Ĺ  | Notice of Intent   |  | -           | Recompletion  |                                     | New Constructi   |   |                                       |          |  |
| Г  | <del>_</del>   |  |             | Plugging Back   |                                     | Non-Routine Fr   | -                                       |                                       |          |  |
| L  | Subsequent Report  |  |             | Casing Repair   |                                     | Water Shut-Off   |   |                                       |          |  |
| r  | <b>–</b>   |  |             | Altering Casing                                       | <u> </u>                            | Conversion to I  | njection                                |                                       |          |  |
| L  | Final Abandonment Notice   |  | <del></del> | Surface Casing/Cementing                              |                                     | Dispose Water  |   |                                       |          |  |
|  | X Other: REQUEST FOR EXT. OF LTSI  |  |             |   |                                     | (Note: Report results of multiple completion on Well         |   |                                       |          |  |
|  |  | <u> </u>                               |             |   |                                     | detion or Recompletion                                       |   | og form).                             |          |  |
|  |  |  |             | s, and give pertinent dates, including estimated date |                                     |  | i work.                                 |                                       |          |  |
| If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markets and zones pertinent to this w                    |  |  |             |   |                                     | vork.)"  | $\mathbb{C}_{\mathbb{C}}$               | $\mathcal{C}$                         |          |  |
|  |  |  |             |   |                                     |  |   | ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; ; | -        |  |
|  | Central Resources 1  | nc requests anno                       | oval        | for Long Term Shut In status for t                    | 20 6                                | uhiect   | F B                                     | 1,3<br>C.3                            | 04<br>04 |  |
| Central Resources, Inc. requests approval for Long Term Shut In status for the s well. Central is in the process of completing a detailed operations and reservoir |  |  |             |   |                                     |  | Ī.,                                     | -1                                    | : J      |  |
|  |  | -                                      |             | •   |                                     | •  |   |                                       |          |  |
| of the Horseshoe Gallup Unit. The study will include a review of all inactive wells and workover potential, and enhanced recovery options.                         |  |  |             |   |                                     | s, urining   | <u> </u>                                | w. a                                  | 3        |  |
|  | and workever petern  | adi, alla cilitatioca                  |             | overy options.  |                                     |  | ,                                       |                                       |          |  |
|  |  |  |             |   |                                     |  |   | <del>ن</del>                          |          |  |
|  |  |  |             |   |                                     | •  |   |                                       |          |  |
|  |  |  |             |   |                                     | - <b>5</b> 2 -   | ~ ~ -                                   |                                       |          |  |
|  |  |  |             | **** 0.1 4007   |                                     | BE   |   | 308/                                  | TEST.    |  |
|  |  | Tras APPAC                             | XX          | L EXPIRES JAN 0 1 1997                                |                                     | M -  | i es E                                  | all U                                 | i.       |  |
|  |  | <b>3</b> (                             |             |   | •                                   | S  | EP -                                    | 1 1956                                | 3 (J     |  |
|  |  |  |             |   |                                     | (C) Fig.   |   |                                       |          |  |
|  |  |  |             |   |                                     |  | COI                                     | M I                                   | DATIV7   |  |
| <del></del>  |  |  |             |   |                                     |  | DIGU                                    |                                       |          |  |
|  |  |  |             |   |                                     |  | - ueru                                  | s <del>(v)</del>                      |          |  |
| 14. I hereby com   | tify that tipe foregoing is true and correct   | $\overline{}$                          | 1           |   | 7                                   | ٠  |   |                                       |          |  |
| Signed: _  | Leur D   | / June                                 | /           | Title: Sunarin Jeclent                                | •                                   | Date: 8-   | -27                                     | ルグ                                    | 6        |  |
|  | This space for Fe  | "                                      |             |   | =-                                  |  |   |                                       |          |  |
|  |  |  |             |   |                                     |  |   |                                       |          |  |

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 fraud

statements or representations as to any matter within its jurisdiction.

Smiri