

**UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT**

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

**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**

Oil Well



Gas Well



Other

**2. Name of Operator**

CENTRAL RESOURCES, INC.

**3. Address and Telephone No.**

1775 Sherman Street Suite 2600 Denver, CO 80203-4313 303-830-0100

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

660' FNL &amp; 585' FEL

Sec. 23-T31N-R17W

**5. Lease Designation and Serial No.**

14-20-603-2022

**6. If Indian, Allottee or Tribe Name**

Navajo

**7. If Unit or CA, Agreement Designation**

Horseshoe Gallup Unit

**8. Well Name and No.**

HSGU #84

**9. API Well No.**

30-045-10656

**10. Field and Pool, or Exploratory Area**

Horseshoe Gallup

**11. County or Parish, State**

San Juan County, New Mexico

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

OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans	
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction	
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing	
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off	
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection	
	<input type="checkbox"/> Surface Casing/Cementing	<input type="checkbox"/> Dispose Water	
	<input checked="" type="checkbox"/> Other: REQUEST FOR EXT. OF LTSI	(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 markets and zones pertinent to this work.)\*

Central Resources, Inc. requests approval for Long Term Shut In status for the subject well. Central is in the process of completing a detailed operations and reservoir study of the Horseshoe Gallup Unit. The study will include a review of all inactive wells, drilling and workover potential, and enhanced recovery options.

THIS APPROVAL EXPIRES **JAN 01 1997**

**RECEIVED**  
SEP - 1 1996

**OIL CON. DIV.**  
DIST. 3

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

Signed: [Signature]Title: SuperintendentDate: 8-27-96

(This space for Federal or State office use)

Approved by: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

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.

NMOCOD

\* See Instructions on Reverse Side

AUG 29 1996