Form: 3160~5 :November 1983) Formerly 9-331)

## UNITED STATES SUBMIT IN TRIPLICATE\* (Other instructions on rerespectively) MENT OF THE INTERIOR \*erse side)

Form approved. Budget Bureau No. 1004-0135 Expires August 31, 1985

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JREAU OF LAND MANAGEMENT	14-20-603-203

BUREAU OF LAND MA	NAGEMENT	77.80.605.2033
SUNDRY NOTICES AND R (Do not use this form for proposals to drill or to d. Use "APPLICATION FOR PERMI	ole. New ofo Tribal	
WELL GAS OTHER Water D. NAME OF OFFICATOR WATER CO.	Injection Well	7. UNIT ÉGREEMENT NAME  8. FARM OR LEASE NAME
ADDRESS OF OPERATOR	lo 80621	9. Wall do.
4. LOCATION OF WELL (Report location clearly and in accordance See also space 17 below.) At surface	lance with any State requirements.	10. FIELD AND POOL, OR WILDCAT Horseshoe Sully
660'F5L + 660'	FWL	11. SEC., T., B., M., OR BLK. AND SURVEY OR AREA //-3/ N-/7W
11. 19	Show whether Dr. RT, GR. etc.)	12. COUNTY OR PARISH 13. STATE  San Juan MM.
	o Indicate Nature of Notice, Re	
NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CAS	-···/	REPAIRING WELL
FRACTIRE TREAT MULTIPLE COMPLET	FRACTURE TREAT	
SHOOT OR ACIDIZE ABANDON*	i	neorarily abandon X
(Other)	(NOTE: Re	ort results of multiple completion on Well or Recompletion Report and Log form.)
the state of the s		and dates including estimated date of starting and
I would like this well for o	lell July 1, 199 il froductión	3 to test & evoluate
	TO COLD O 10:	2 E
	CH, COCK MCA C	$\omega = \frac{\omega}{\omega}$
18. I hereby sertify that the foregoing is true and correct SIGNED John Months	TITLE O peralo	7 DATE 10-20-92
(This space for Federal or State office use)		
	TITLE	APPROVED
APPROVED BY		

\*See Instructions on Reverse Side

AREA MANAGER