

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. Ute 14-20-604-62
2. Name of Operator Cross Timbers Operating Company		6. If Indian, Allottee or Tribe Name Ute Mountain Ute Indian Tribe
3a. Address 2700 Farmington Ave., Bldg K, Suite 1, Farmington, NM 87401	3b. Phone No. 505/234-1090	7. If Unit or CA/Agreement, Name and/or No. 22645
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Surface - 570' RWL & 1045' FEL, Sec. 2, T31N, R14W, Unit Ltr P Proposed Prod Zone - 850' FSL & 1450' FEL, Unit Ltr O		8. Well Name and No. Ute Indians A #26
		9. API Well No. 30-045-29868
		10. Field and Pool, or Exploratory Area Ute Dome Paradox
		11. County or Parish, State San Juan Co. NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other 5-1/2"
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Production casing
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

Drilled formation w/7-7/8" bit to 8,750', TD, 10/24/99. RU & ran 5-1/2" , 17#, J-55 & K-55, LTC csg & set @ 8,750'. Cmt'd csg in two stages: 1st Stage - Cmt'd w/700 sx 50/50 Poz B cmt w/2% gel, 1/2% D-60, 1/4#/sx D-29 & 0.1% D-65 (12.8 ppg, 1.55 cuft/sx). Ttl slurry on 1st Stage 1,085 cuft. Disp cmt w/125 BFW & 77 bbls mud. PD @ 5:45 pm, 10/24/99. Bumped plug to 2500 psig (830 psig over final disp press). Float held. Good circ throughout job. Set DV tool @ 3679'. Opened DV tool w/800 psig. 2nd Stage - Cmt'd w/280sx C1 B cmt w/2% D-79, 1/4#/sx D-29 & 2% CaCl (11.4 ppg, 2.87 cuft/sx) followed by 520 sx of C1 B cmt w/2% D-79, 1/4#/sx D-29 & 2%CaCl (13.5 ppg, 1.71 cuft/sx). Ttl slurry vol for 2nd Stage 1,692 cuft. Disp cmt w/85.5 BFW. Closed DV tool w/2,500 psig (1,766 psig over final disp press). Circ 23 sx of cmt to surf on 2nd Stage. PD @ 11:40 pm, 10/24/99. ND BOP, set slips on csg w/115,000# tens. Cut off csg. NU & tstd WH. Released rig @ 6:00 am, 10/25/99. WO completion.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Bobby L. Smith	Title Drilling/Operations Manager
Date 10/26/99	

THIS SPACE FOR FEDERAL OR STATE OFFICE USE		
Approved by San Juan Resource Area	Title	Date
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, 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.

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