APPROVED BY _	APPROVAL, IF ANY :		DATE DATE
SIGNED	ederal or State office use)	President	
I hereby certify th	hat the foregoing is true and correct		JUN2 1 1935 6-14-85
		14	
	install 5 it. steel iden		OF PESCHAR
	level. Cut off 8-5/8" 3 install 5 ft. steel ident	below GL and w	eld on steel plate,
6-7-85	- Spot 50 sx plug from 3100 spot 50 sx plug 675'-575	' and 15 sx plug	50'-3' below ground
6-6-85	 Notified BLM-Roswell of in received verbal approval. 		
	DST 3110' to 3245' and 32 and no shows of oil or ga	284' to 3398', re	
6-5-85	- Reached TD at 3398, ran Litho Density Log, and Na		
6-1-85	- Cemented 630' 8-5/8" surf	ace csg.	
nent to this worl 5-30-85	- MIRU Service Drilling Co.	Rig #5	
DESCRIBE PROPOSEI proposed work.	OR COMPLETED OPERATIONS (Clearly state all pertinent If well is directionally drilled, give subsurface locat	details, and give pertinent dat	es, including estimated date of starting any
REPAIR WELL (Other)	CHANGE PLANS		its of multiple completion on Well apletion Report and Log form.)
FRACTURE TREAT	ABANDON*	FRACTURE TREATMENT Shooting or acidizing	ALTEBING CABING
TEST WATER SHU		WATER SHUT-OFF	EEPAIRING WELL
	NOTICE OF INTENTION TO :		EQUENT REPORT OF:
	4088.5' GL Check Appropriate Box To Indicate N	ature of Notice Report or	Quay New Mex
PERMIT NO	15. ELEVATIONS (Show whether DF,	RT, GR, etc.)	12. COUNTY OR PARISH 13. STATE
NMPM, 12 miles northeast of Tucumcari, NM			Sec. 25, TI3N, R31E, NMPM
See also space 17 below.) At surface 1650' FWL & 920' FNL, Sec. 25, T13N, R31E,			Wildcat 11. SHC, T., R., M., OR BLK. AND
Dallas, Texas 75230 LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*			10. FIELD AND POOL, OR WILDCAT
ADDRESS OF OFFERATOR 5310 Harvest Hill Rd., Suite 180			9. WBLL NO.
WELL WELL & OTHER NAME OF OPERATOR Canyon Resources, Inc.			8. FARM OB LEABE NAME Harvey/US
		· · · · · · · · · · · · · · · · · · ·	7. UNIT AGREMENT NAME
SU (Do not we t	bis form for proposals to drill or to deepen or plug b. Use "APPLICATION FOR PERMIT-" for such pr	ack to a different reservoir.	
	BUREAU OF LAND MANAGEMENT		NM-55810 6 IF INDIAN, ALLUTTEE OB TRIPE NAME

*See Instructions on Reverse Side