Form 3160-5
(November 1983)
Formerly 9-331)

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

C/SF

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE* (Other instructions on reverse side)

Artesia, NM 88210

5. LEASE DESIGNATION AND SERIAL NO.: NM 14840

6. IF INDIAN, ALLOTTEE OR TRIBE NAME:

7. UNIT AGREEMENT NAME:

8. FARM OR LEASE NAME: Dalton Federal

9. WELL NO.: 1

10. FIELD AND POOL, OR WILDCAT: Grayburg-Jackson

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA: Sec. 29: T17S, R29E

12. COUNTY OR PARISH: Eddy

13. STATE: NM

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

RECEIVED BY
JUL -2 1986
O. C. D.
ARTESIA, OFFICE

OIL WELL [X] GAS WELL [ ] OTHER

2. NAME OF OPERATOR: Siete Oil & Gas Corporation

3. ADDRESS OF OPERATOR: P. O. Box 2523, Roswell, NM

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface: 1650' FNL, 990' FEL

14. PERMIT NO.:

15. ELEVATIONS (Show whether DF, RT, GR, etc.): 3592' GR

16. **Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data**

NOTICE OF INTENTION TO:				SUBSEQUENT REPORT OF:			
TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]	WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]	FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]	SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[ ]	(Other) Temporary Shut In			[X]
(Other)				(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)			

17. 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 markers and zones pertinent to this work.)*

We Request Permission to Temporarily Shut this well in for 1 year effective 11/14/85.

APPROVED FOR 12 MONTH PERIOD
ENDING 6/26/87

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

SIGNED [signature] TITLE Production Supervisor DATE 6/17/86

(This space for Federal or State office use)

APPROVED BY Orig. Sgd. Charles E. Gholson Area Manager TITLE _____ DATE 6-27-86

CONDITIONS OF APPROVAL, IF ANY:

*See Instructions on Reverse Side

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.