		<b>1</b>	<b>~</b>
· · ·		Oil Cons.	
rm 3160-5	UNITED STA	ATES N.M. DIV-Dist. 2	
ne 1990)	DEPARTMENT OF T	HE INTIGON W. Grand Ave	Budget Bureau No. 1004–0135 Expires: March 31, 1993
	BUREAU OF LAND M	IANAGEMATtesia, NM 8821	5. Lease Designation and Serial No.
SI	JNDRY NOTICES AND RI		NM 30062
		deepen or reentry to a different rese	6. If Indian, Allottee or Tribe Name
Use	"APPLICATION FOR PERMI	T—" for such proposals	
			7. If Unit or CA, Agreement Designation
. Type of Well	SUBMIT IN TRI	PLICATE	
Oil Cas Well	Other	<b>6789</b> 10	8. Well Name and No.
. Name of Operator			Long Box #1
Pronghorn Mana	agement Corp.	234	9. API Well No.
. Address and Telephone No.	······································	1 0.0%	30-015-22624
P. 0. Box 1772		E CORCE	10. Field and Pool, or Exploratory Area
	c., T., R., M., or Survey Description)	Re Tolog	Wildcat
1980' FNL ¢ 60	50' FEL		37 11. County or Parish, State
S30-T20S-R24E	\$	AND FR	Eddy
CHECK APP	PROPRIATE BOX(S) TO IN	IDICATE NATURE OF NOTICE,	REPORT, OR OTHER DATA
TYPE OF SUB	MISSION	TYPE OF A	CTION
Notice of Inte	ent	Abandonment	Change of Plans
		X Recompletion	New Construction
Subsequent R	eport	Plugging Back	Non-Routine Fracturing
_		Casing Repair	Water Shut-Off
Final Abando	ament Notice	Altering Casing	Conversion to Injection
		Other	Dispose Water
			(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
		ctails, and give pertinent dates, including estimated date r all markers and zones pertinent to this work.)*	of starting any proposed work. If well is directionally drilled.
1. We have	a well that is capa	ble of producing in paying	quantities.
	-	We plan to produce well	-
		- · ·	
		uges. Return well to produ	uction.
Evaluat	e data.		
3. If data	an indiantan mand	11 treat wall with 10 000	12 000 collogs and
J. II Gala	so indicates, we will	11 treat well with 10,000 -	
4. Prodúce	and evaluate produc	tion. May be necessary to	install compressor.
	• • •	,	
		Lease NM-30062 Expired 08-2	23-2002, The End Of Its
	• **** # #= # #	Extended Term Without an Ac	ceptable Showing That
U1		Well is Capable of Production	In Paying Quantities.
	· · ·		·
14. I hereby certify that the fores	oing is true and correct		
Signed	Mater	Title_Partner	Date 9/6/02
(This space for Federal or St	ate office use)		
Denied (ORIG	G. SGD.) <b>David R.</b> Glas	SS	SEP 0 9 2022
Conditions of approval, if any	y:	Title PEI Mouse and and	Date Date
			4
Tide 19 11 0 0 Carding 1001	the it a crime for any more thank - to	and willfully to make to any day strengt or any of	the United States and false Statistics of the Annual
Title 18 U.S.C. Section 1001, ma or representations as to any matte		and wantury to make to any department or agency of	the United States any false, fictitious or fraudulent statements
	*<	See Instruction on Reverse Side	
		- •	

<b>36</b>	Inst	truct	lon	on	Reverse	s Sid