Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

•	DEPARTMENT OF THE		- / '	Expires November 30, 2000	
	BUREAU OF LAND MAN		. /	5. Lease Serial No.	
SUNDA Do not use th	Y NOTICES AND REP	ORTS ON WELLS o drill or to re-ente	er an	14-20-603-2033 6. If Indian, Allottee or Tribe Name	
abandoned we	nis form for proposals t ell. Use Form 3160-3 (Al	D) for such propos	als.	•	
		Marie de la companya	raceka skironomaracenni≘rkkilisiken	Navajo Tribal	
SUBMITINTE	IPLICATE - Other Inst	ructions on rever	se side	7. If Unit or CA/Agreement, Name and/or	No.
1. Type of Well					
	Th Outron		,	8. Well Name and No.	
Oil Well Gas Well 2. Name of Operator	Oiner			Navajo TI "G" #222	
Hart Oil and Gas Inc.	*	·		9. API Well No.	
3a. Address		3b. Phone No. (inc.	lude area code)	300451111700S1	
P.O. Box 307 - Farmi	ngton, N. M. 87499	(505) 326-1	163	10. Field and Pool, or Exploratory Area	
4. Location of Well (Foolage, Sec.	., T., R., M., or Survey Descripti	on)		Horseshoe Gallup	
530' FNL &2140' FWL			,	11. County or Parish, State	
TWP/LAT RGE/LON	SEC QTR 2 NENW			San Juan, N. M.	
31N 17W		DO TATION OF ALAR	TIPE OF NOTICE DE	DODE OF OTHER DATA	************
12. CHECK AF	PROPRIATE BOX(ES)	TO INDICATE NAT	URE OF NOTICE, KE	PORT, OR OTHER DATA	
TYPE OF SUBMISSION		• •	TYPE OF ACTION		
:	☐ Acidize	Deepen	Production (Start/	Resume)	
Motice of Intent	Alter Casing	Fracture Treat	Reclamation	Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	Other	
Suosequem Report	Change Plans	Plug and Abando	n Temporarily Aba	ndon	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
testing has been completed. Fit determined that the site is ready Returned to product	inal Abandonment Notices shall for final inspection.)	nel interpretation	quirements, including rectar	na new interval, a Form 3160-4 shall be file pation, have been completed, and the operation, have been completed, and the operation of the ope	itor has
14. I hereby certify that the foregoin Name (Printed/Typed) Gina M. Sc		Title	85.53.43.	E-PRESIDENT	
/A	Mo				
Signature / Max	11. Sail	Date	01/	07/03	<u>Pienierwi</u>
	THIS SPACE	FOR FEDERAL OR	STATEO FILE USE		
Approved by	· · · · · · · · · · · · · · · · · · ·		Title	Date	
Conditions of approval, if any, are					
certify that the applicant holds legi which would entitle the applicant to		ints in the Subject lease	Office ACC	CEPTED FOR RECORD	

FARMING ON FIZED OFFICE

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