

**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

SUBMIT IN TRIPPLICATE*
(Other instructions on re-
verse side)

Form approved,
Budget Detail No. 1001 0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.

NM 0555838-A

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

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.)

1. OIL WELL GAS WELL OTHER

2. NAME OF OPERATOR
Basin Fuels, Ltd.

3. ADDRESS OF OPERATOR
P. O. Box 50, Farmington, N.M. 87499

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.*
See also space 17 below.)
At surface
1980' FSL and 330' FWL

14. PERMIT NO. _____ 15. ELEVATIONS (Show whether DF, RT, OR, etc.)
6767 GL

7. UNIT AGREEMENT NAME

8. FARM OR LEASE NAME

Star

9. WELL NO.

5

10. FIELD AND POOL, OR WILDCAT
Franciscan Lake
Mesa Verde

11. SEC. T., S., M., OR BLK. AND
SURVST OR AREA

Sec. 7, T29N, R5W, NMPM

12. COUNTY OR PARISH

McKinley

13. STATE

N.M.

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

TEST WELL SHUT-OFF <input type="checkbox"/>	PULL / ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT FEB 1 1991 <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	REPAIR OR PLANS <input type="checkbox"/>	(Other) See below <input type="checkbox"/>	

(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.)*

This well is currently in long term shut-in status. Request that this status be continued for additional one (1) year period.

This well went down in 1988 with a hole in the tubing. At that time it was making less than one barrel of oil per day. However, the well consistently made in excess of One Hundred Thousand Cubic feet of gas per day (100 MCFPD) while it was in production, which gas was used to operate pumping equipment and separators on the lease.

The nearest market for the gas is Gas Company of New Mexico's main line to Albuquerque, approximately 4-1/2 miles distant. Cannot justify expenditure to build pipeline at current gas prices.

Well was drilled in 1977. Cement was circulated to surface. No contamination of other formations is expected.

THIS APPROVAL EXPIRES **DEC 01 1991**

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

SIGNED Joel B. Burr, Jr. TITLE Owner

(This space for Federal or State office use)

APPROVED BY _____ TITLE _____

CONDITIONS OF APPROVAL, IF ANY:

APPROVED

DATE 11/30/90

DATE JAN 31 1991

AREA MANAGER
FARMINGTON RESOURCE AREA

*See Instructions on Reverse Side