Form approved. Budget Bureau No. 1004-0135 UNITED STATES

SUBMIT IN TRIPLICATE®

Other Instructions on reverse side) 7orm 3160-5 Expires August 31, 1985 November 1983) dormerly 9-331) 5. LEASE DESIGNATION AND SERIAL NO. BUREAU OF LAND MANAGEMENT Contract No. 41 6. IF INDIAN, ALLOTTEE OR TEIBE 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.

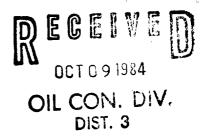
Use "APPLICATION FOR PERMIT—" for such proposals.) Jicarilla Tribal 7. UNIT AGREEMENT NAME WELL OIL WELL XX Jicarilla Tribal OTHER 8. FARM OR LEASE NAME NAME OF OPERATOR Jicarilla D <u>El Paso Natural Gas Company</u> 9. WBLL NO. 3. ADDRESS OF OPERATOR P. O. Box 4289 Farmington, NM 10 LOCATION OF WELL (Report location clearly and in accordance with any State-requirements.)

See also space 17 below.)

At surface 10. FIELD AND POOL, OR WILDCAT Blanco PC OCT -3 1984 11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA 1760'S - 1150'E 30 REAU OF LAND Sec. 20 T-25N, R-4-W 15. ELEVATIONS (Show whether DY, RT, GR, etc.) 14. PERMIT NO. 12. COUNTY OR PARISH | 13. STATE 7249 DF NM <u>Rio Arriba</u> 16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data NOTICE OF INTENTION TO: SUBSEQUENT REPORT OF: TEST WATER SHUT-OFF PELL OR ALTER CASING WATER SHUT-OFF REPAIRING WELL FRACTURE TREAT MULTIPLE COMPLETE FRACTURE TREATMENT ALTERING CASING SHOOT OR ACIDIZE ABANDON* SECOTING OR ACIDIZING ABANDON MENT® Surface Rehab. REPAIR WELL CHANGE PLANS (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (Other)

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.)*

Surface rehabilitation and re-seeding have been completed.



18. I hereby certify that the foregoing is true and SIGNED LANGE DRANGELLED		ACCEPTED FOR BEGORD 984
SIGNED OF THE STATE OF THE SIGNED OF THE SIG	TITLE BITTING OFFICE	ACCEPTED
(This space for Federal or State office use)		
APPROVED BY	TITLE	PAGE 1 0 1984
CONDITIONS OF APPROVAL, IF ANY:	n national and the second	FARMINGIUN RESOURCE AREA
	AND CO	FARMINGTON 1125
	*See Instructions on Reverse Side	BY 6