Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BURGELL OF LAND MANAGEMENT

FORM APPROVED		
Budget Bureau No. 1004-0135		
m : 14 04 4002		

BUREAU OF	LAND MANAGEMENT RECEI	IV () Expires: March 31, 1993
	SAND DEDORTE ON WELLS	5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to deepen or reentry to a different feet for proposals.		SF-079602
	OR PERMIT -" for such proposals	6.11 Indian Alottee or Tribe Name
USE AFFEIGATION	610 ALBUQUE	7. Thurit of CA, Agreement Designation
SUBM	IT IN TRIPLICATE	
. Type of Well: OIL GAS WELL WELL	OTHER	Well Name and Number L L MCCONNELL ,
WLLL WELL	→ OTHER	E E MICCONNELL
2. Name of Operator FOUR STAR OIL AND GAS COMPANY		13
8. Address and Telephone No. 3300 N. Butler Ave., Suite 100 Farmington NM 87401 325-4397		9. API Well No. 3003923008
4. Location of Well (Footage, Sec., T., R., M., or Sur	vey Description)	10. Field and Pool, Exploratory Area
Unit Letter N : 970 Feet From T	he SOUTH Line and 1800 Feet From The	LINDRITH GALLUP-DAKOTA, WEST
WEST Line Section 31	Township T25N Range R03W	11. County or Parish, State RIO ARRIBA, NM
	Pay(a) To Indicate Nature of Notice Re	eport or Other Data
	Box(s) To Indicate Nature of Notice, Re	PE OF ACTION
TYPE OF SUBMISSION	Abandonment	Change of Plans
	Recompletion	New Construction
Notice of Intent	Plugging Back	Non-Routine Fracturing
Subsequent Report	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
Final Abandonment Notice	OTHER:	Dispose Water
		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)
DRILL 4-3/4" HOLE IN LATERAL SECTION F AZIMUTH 74.2 DEG CLEAN UP HOLE. SE TUBING, ACIDIZE WITH 10,000 GALS 7-1/29 BOTTOM HOLE LOCATION FROM SURFAC	DTA PERFS @ 6882'-7841'. MILLED CASING AT 6780'ROM KICK-OFF-POINT AT 6790', TO 8609' (MD), 699- ET TUBING AT 6735'. SET RODS & PUMPING UNIT. FICH ACROSS ENTIRE OPEN HOLE. RESET TUBIN E LOCATION IS: 1666'N 78 deg. E: 1318' FROM	PUMP SEVERAL DAYS. RIG UP COILED NG, SET PUMP. PUT ON PUMP.
SEC. 31 T25N / R03W		
		PROFFER
		FEB 1 5 Not. 1/
		OUL COME LINE
1019b		
14. I hereby certify that the foregoing is true and correct SIGNATURE 3 & C. T.	TITLE Operating Unit Manager	DATE 1/29/96
0101011101112	. Tipton	
(This space for Federal or State office use) APPROVED Labert Kess CONDITIONS OF APPROVAL, IF ANY:	Chief, Lands and Milneral Resour	rcesFEB 1 4 1996
	on knowingly and willfully to make to any department or agency of the Uni	ited States any false, fictitious or fraudulent statements or
	. / ./	