	on the second processes of the second
Form 3160-5 UNITED STATES SUBMIT IN TRIPLICATES	Budget Bureau No. 1004-0135 Expires August 31, 1985
(November 1983) (Formerly 9-331) DEPARTMENT OF THE INTERIOR (Other Instructions on re-	5. LEASE DESIGNATION AND SERIAL NO.
BUREAU OF LAND MANAGEMENT	SF 081332
CUNIDAY MOTICES AND DEDODES ON WELLS	6. IF INDIAN, ALLOPTES 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.)	
i.	7. UNIT CORRESSET HAMB
OIL K GAB OTRER	
2. NAME OF OPERATOR	8. FARM OR LEASE NAME
Reading & Bates Petroleum Co.	Ingram Federal /
3. ADDRESS OF OPERATOR	9. WELL NO.
2200 Mid-Continent Tower Tulsa, OK 74103	43 - 55
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)	10. PIBLE AND POOL, OR WILDCAT
At surface	Gavilan Mancos
2025'FSL 915'FEL	11. SEC., T., E., M., OR RLE. AND SURVEY OR AREA
S	
<u>. 5</u> 28	Sec. 16-T25N-R2W
14. PERMIT NO. 15. ELEVATIONS (Show whether DF, RT, QR, etc.)	12. COUNTY OR PARISE 18. STATS
	Rio Arriba NM
16. Check Appropriate Box To Indicate Nature of Notice, Report, or O	ther Data
	BNT REPORT OF:
TEST WATER SHUT-OFF PULL OR ALTER CASING WATER SHUT-OFF	BEPAIRING WELL
PRACTURE TREATMENT PRACTURE TREATMENT	ALTERING CASING
SHOOT OR ACIDIES ABANDON*	ABANDON MENT®
REPAIR WELL CHANGE PLANS (Other)	of multiple completion on Well
(Other) Completion or Recomple 17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates,	etion Report and Log form.)
Well was spud at 3:00 PM on 7-6-87.	l depths for all markers and sones perti-
Ran 9-5/8" casing on 7-7-87;	
Guide Shoe 1'	
1 jt 9-5/8" 36# K-55 STC 45.00'	
9-5/8" float insert -	
7 jts 9-5/8" 36# K-55 STC 301.37'	
Cemented at 359'KB as follows:	
224 ft ³ Class B + 2% CaCl ₂ + 1/4# celloseal/sk	
Coment circulated to curfoce	
Plug down @ 6:45 AM 7-7-87.	
Shoe tested to 600 psi for 30 min; no pressure loss.	WEGELD
	O.1 CON. DIV
18. I hereby certify that the foregoing is true and correct SIGNED TITLE Sr. Engineer Technician (This space for Federal or State office use)	

APPROVED BY CONDITIONS OF APPROVAL, IF ANY: