	6 BLM	1 File			Form approved.  Budget Bureau No. 1004-	0135
Form 3160- (November		UNITED STA DEPARTMENT OF TH	TES IF INTERIOR	SUBMIT IN TRIPLICATE* (Other instructions on re- verse side)	Expires August 31, 1985  5. LEASE DESIGNATION AND BERIAL	NO.
(Formerly 9	1-331)	BUREAU OF LAND MA			NM 2337	
	CUNID	RY NOTICES AND R		WELLS	6. IF INDIAN, ALLOTTEE OR TRIBE	MAME
(Do		rm for proposals to drill or to d Use "APPLICATION FOR PERMI	eenen or niuz back	to a dinerent reservoir.		
<u>i.</u>		USE "APPLICATION FOR PERSIT			7. UNIT AGREEMENT NAME	
METE [	GAS GAS	У отята			8. PARM OR LEAST NAME	
2. NAME OF		PRODUCTION COR	Р.		Chaco	
3. ADORESS	OF OPERATOR	T NODOCTION CON	• • • • • • • • • • • • • • • • • • • •		9. WHLL NO.	
PO Box 208, Farmington, NM 87499  Location of Well (Report location clearly and in accordance with any Stat RECENTED  See also space 17 below.)					10. FIELD AND POOL, OR WILDCAT	
See also space 17 below.) At surface					Potwin P.C.	
980' FSL - 1740' FEL JUN () 9 1986					11. SEC., T., E., M., OR BLK. AND SURVEY OR AREA	
	•			-10M A 9 1200	Sec. 6, T24N, R8W, NMP	M_
14. PERMIT	NO.			AU OF LAND MANAGEMENT	12. COUNTY OR PARISH 13. STATE	:
			<u>GE</u>	MINGTON RESOURCE AREA	San Juan   NM	
18.		Check Appropriate Box T	o Indicate Natu			
	No	TICE OF INTENTION TO:		#388EQ	UENT REPORT OF:	7
TEST W	TATER SHUT-OFF			WATER SHUT-OFF FRACTURE TREATMENT	ALTERING CASING	-
	OR ACIDIZE	MULTIPLE COMPLETE ABANDON®	XX	SHOOTING OR ACIDIZING	ABANDONMENT*	_
REPAIR		CHANGE PLANS		(Other)	of multiple completion on Well	]
Other		Clauda st	tate all pertinent de	Completion or Recomp	including estimated date of startic	ig any
propo	e this work. If the this work.)	well is directionally drilled, give	subsurface locations	and measured and true vertic	al depths for all markers and sones	perti-
		,				
	We plan	n to plug and abando	n the subjec	t well as follows:		
	1 5	ill 2-7/8" OD, 6.4#, .	I-55. 10R. N	EUE tubing for cas	ing from	
	1. F P	.B.T.D. of 1932 to s	at cement.			
	a la	nstall permanent dry	hole monume	ent.		
	2. Ir	istali permanent di y	note mortaine			· No.
	3. F	ill all pits.			S. 18	1
	4. C	lean well location of	all equipmen	t, pipe, junk and t	rash.	
		ccomplish surface re				
	5. A	ccomprisit surface re	5101 41.011 45			) B,
	6. C	ut off tie-downs.				
					Express and the second	
				C. 42	odna smrti	
					APPROVED	
18. I hereby	by certify that the foregoing is true and correct				5 5 95	
SIGNED	Sherm	y E ugan	TITLE Geo	ologist	DATE6-6-86	
(This ap	Shern oace for Federa	nan F. Lyugan lor State office use)			JUH \$ 0) 1986	
APPROVED BY TITLE CONDITIONS OF APPROVAL, IF ANY:					_ Door Stell	
					FELL MANAGER	
(					PRAMINITION AUSQUITTE ASEA	
The state of the s	(h)	*Se	e Instructions on	Reverse Side	same particular de la companya de l Companya de la companya de la compa	
1	ソ		NMOCC			