Form 3160-5 (June 1990)		FORM APPROVED Budget Bureau No. 1004-0135
		Expires: March 31, 1993
UNITED STATES DEPARTMENT OF THE INTERIOR		5. Lease Designation and Serial No. SF 078067
BUREAU OF LAND MANAGEMENT		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 reentry to a different reservoir,  Use "APPLICATION FOR PERMIT" for such proposals		7. If Unit or CA. Agreement Designation
SUBMIT IN TRIPLICATE		Carson Unit
1. Type of Well		8. Well Name and No.
Oil Well Gas Well	X Other Water Source Well	Carson Unit #3=14
2. Name of Operator		9. API Well No.
Giant Exploration & Production Company		30-045-05391
3. Address and Telephone No.		10. Field and Pool, or Exploratory Area
P.O. Box 2810, Farmington, New Mexico 87499 (505)326-3325		Gallup
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		11. County or Parish, State
2553' FNL, 2325' FEL, Sec. 14, T25N, R12W		San Juan, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION TYPE OF ACTION		
	Abandonment	Change of Plans
Notice of Intent	Recompletion	New Construction
	Plugging Back	Non-Routine Fracturing
X Subsequent Report	Casing Repair	Water Shut - Off
	Altering Casing	Conversion to Injection
Final Abandonment Notice		e: Report results of multiple completion on Well pletion or Recompletion Report and Log form.)
NMOCD representative Johnny Ro	measured and true vertical depths for all markers st to 500 psi for 30 min. Test was witnes	sed by
14. I hereby certify that the foregoing is true and correct Signed Poul R. Williams	t TitleArea Engineer	Date SEP 1 6 1994
Paul R. Williams (This space for Federal or State office use)		
Approved by	Title	Date
Conditions of aproval, if any:		
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictious or fraudulent statements or representations as to any maner within its jurisdiction.		

\*See Instruction on Reverse Side

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