

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
Sundry Notices and Reports on Wells

1. Type of Well
Gas

2. Name of Operator
Central Resources, Inc.

3. Address & Phone No. of Operator
PO Box 1247 Bloomfield NM87413 (505) 632-3470

Location of Well, Footage, Sec., T, R, M
1950' FSL and 1800' FEL, Sec. 10, T-25-N, R-12-W,

5. Lease Number
NM 070322

6. If Indian, All. or
Tribe Name

7. Unit Agreement Name

8. Well Name & Number
Carson #207

9. API Well No.
30-045-26377

10. Field and Pool
Fruitland PC

11. County & State
San Juan County, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action	
<input type="checkbox"/> Notice of Intent	<input checked="" type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other -	

13. Describe Proposed or Completed Operations

Central Resources Plugged & Abandoned this well per the following:

- 1-18-99 Road rig and equipment to location, RU. Layout relief line to pit. Check well pressures: casing 40# and tubing 0#, bleed well down. POH and LD 43 5/8" rods, 1 stator, 1 rotor and 1 4' sub. ND wellhead. POH and LD 33 joints 1-1/2" tubing. Shut in well and SDFD.
- 1-19-99 Safety Meeting. Plug #1 with 40 sxs Class B cement pumped down 2-7/8" casing from 1080' to surface, shut in with 200# pressure. RD rig and MOL.
- Open up well and tag cement at 220'. Cut off wellhead. Fill casing and install P&A marker with 5 sxs Class B cement.
- J. Morris, BLM representative was on location 1/19/99.

14. I hereby certify that the foregoing is true and correct.

Signed Rocky J. Sell 2-13-99 Title District Manager Date 2/8/99

(This space for Federal or State Office use)

APPROVED BY _____ Title _____
CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

FEB 22 1999

NMOCD

FARMING OFFICE
BY _____