Form 3160-5 (June 1990)

UNITED STATES

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FORM APPROVED Budget Bureau No. 1004-0135

	NI OF THE INTERIOR	Expires: March 31, 1993
BUREAU OF	LAND MANAGEMENT 2002 APR 24 AM	5. Lease Designation and Serial No. NMSF-078089
SUNDRY NOTICES	AND REPORTS ON WELLS	(1131 070005
Do not use this form for proposals to de	ill or to deepen or reentry to a different reservor	I NM NA
Use "APPLICATION FO	R PERMIT—" for such proposals	
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
Type of Well		NA NA
Oil Gas Well Other		8. Well Name and No.
2. Name of Operator		Scott Federal 27-11 #36
Markwest Resources Inc		9. API Well No.
3. Address and Telephone No. 155 Inverness Drive West Suite 200, Englewood, Co 80112		30-045-30965 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		Kutz PC West
		11. County or Parish, State
NWSE 870' FNL & 665' FWL Sec. 36-27N-11W		San Juan Ca NM
		San Juan Co. NM
CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
(19 1	Recompletion	New Construction
X Subsequent Report	Plugging Back	Non-Routine Fracturing
—	Casing Repair	₩ater Shut-Off
Final Abandonment Notice	L. Altering Casing Other	Conversion to Injection
	C Ouer	Dispose Water (Note: Report results of multiple completion on Well
. Describe Proposed or Completed Operations (Clearly state a	li pertinent details, and give pertinent dates, including estimated date of startin	Completion or Recompletion Report and Log form.) g any proposed work. If well is directionally drilled,
give subsurface locations and measured and true verti	cal depths for all markers and zones pertinent to this work.)*	
	6-1/4" hole to TD 2,200'. Ran 4-1/2"	
	ollar 02,149.88. Pumped 180 sacks clas	
	1 3% gilsonite and tailed with 50 sks of	class "B" w/4% gel,
2% Caciz and 1/4#/SK Cerror	lake. Circ 19 bbls cmt to surf. WOC.	
	127 6.2	
	San	
		÷
		in the section
		ATR 2.5 2002
		PARMING AMELS SON
4. I hereby certify that the foregoing is the and correct	Operator Representative	4-12-02
Signed	Title	Date V
(This space for Federal or State office use)		
Approved by	Title	Date
Conditions of approval, if any:		