

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other WIW		5. Lease Designation and Serial No. NM 077281
2. Name of Operator Central Resources, Inc.		6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. P.O. Box 2810, Farmington, New Mexico 87499 (505)326-3325		7. If Unit or CA. Agreement Designation Northeast Hogback Unit 14-08-001-6674
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1970' FSL, 2210' FWL, Section T0, T30N, R16W		8. Well Name and No. Northeast Hogback Unit #31
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		9. API Well No. 30-045-09696
TYPE OF SUBMISSION		10. Field and Pool, or Exploratory Area Horseshoe Gallup
TYPE OF ACTION		11. County or Parish, State San Juan, New Mexico
<input type="checkbox"/> Notice of Intent	<input 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 Notice	<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 checked="" type="checkbox"/> Other Return to Injection	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well
Completion or Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Central Resources, Inc. returned the subject well to injection on December 31, 1997 at 300 psi and 250 Bwpd.

RECEIVED
JAN 12 1998
OIL CON. DIV.
DIST. 3

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

Signed Gregory E. McIntosh Title Production Engineer Date 1/6/98

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____

Conditions of approval, 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, fictitious or fraudulent statements or representations as to any manner within its jurisdiction.

*See Instruction on Reverse Side

FARMINGTON DISTRICT OFFICE

NMOCD