Form 3160-5 (June 1990)			FORM APPROVED Budget Bureau No. 1004-0135
UNITED STATES DEPARTMENT OF THE INTERIOR			Expires: March 31, 1993 5. Lease Designation and Serial No.
BUREAU OF LAND MANAGEMENT			14-20-603-733 6. If Indian, Allottee or Tribe Name
SUNDRY NOTICES AND REPORTS ON WELLS			Navajo
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 1. Type of Well			Horseshoe Gallup Unit
X Oil Well Gas Well Other			8. Well Name and No. HSGU #133
2. Name of Operator Central Resources, Inc.			9. API Well No.
3. Address and Telephone No.			30-045-09978 10. Field and Pool, or Exploratory Area
P.O. Box 2810, Farmington, New Mexico 87499 (505)326-3325 4. Location of Well (Footage, Sec. T., R., M., or Survey Description)			Horseshoe Gallup
1650' FNL, 1650' FWL, Sec. 5, T30N, R16W			11. County or Parish, State San Juan, New Mexico
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, C			
THE OF SUBMISSION		TYPE OF A	CTION
		Abandonment	Change of Plans
X Notice of Intent		Recompletion	New Construction
		Plugging Back	Non-Routine Fracturing
Subsequent Report		Casing Repair	Water Shut-Off
		Altering Casing	Conversion to Injection
Final Abandonment Notice	X	Other Return to Production	Dispose Water (Note: Report results of multiple completion on Well
12 Day 1 0			Completion or Passweleties Person 11 C
directionally drilled, give subsurface	erations (Clearly stations) locations and meas	ate all pertinent dates, including escured and true vertical depths for a	stimated date of starting any proposed work. If well is all markers and zones pertinent to this work.)*
Central Resources, Inc. plans			position to this work.
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		Access to the second	, swi
14. I hereby certify that the foregoing is	true and correct		
Signed Gregory E. McIntosh	Title	Production Engineer	Date
(This space for Federal or State offi	ce use)		/ /
Approved by	Title	· · · · · · · · · · · · · · · · · · ·	Date
Conditions of approval, if any:			
fictitious or fraudulent statements or representations.	rime for any persor sentations as to any	knowingly and willfully to make manner within its jurisdiction.	to an AC (Composite Control States any false,
	*S	ee Instruction on Reverse Side	4 4 400
			APR 1 1 1997
			FARMINGTON DISTRICT OFFICE
		NMOCD	BY SN'W'

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