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Form 3160-5 (June 1990)	DEPARTMEN	UNITED STATES RTMENT OF THE INTERIOR			FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993
	BUREAU OF	LAND MANAGE	MENT	5.	Lease Designation and Serial No. NMSF-079968
	SUNDRY NOTICES	AND REPORTS	ON WELLS	6.	If Indian, Allottee or Tribe Name
Do not use t	his form for proposals to di Use "APPLICATION FO		r reentry to a different reservo such proposals	oir.	N/A
SUBMIT IN TRIPLICATE				j.	If Unit or CA, Agreement Designation N/A
1. Type of Well Oil Well 2. Name of Operato	Gas Well Other			8. 1	Well Name and No. WF Fed. 33 #1
Richardson Operating Co. (303) 830-8000					API Well No. 50 045-3044 L
1700 Lincoln, Suite 1700, Denver, Co. 80203 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10.	Field and Pool, or Exploratory Area Vin PC & Fr. Coal
Surface: NWNE 33-30n-14w				11.	County or Parish, State San Juan, NM
BHL: San		•			
12. CHE	ECK APPROPRIATE BOX	(s) TO INDICATE	NATURE OF NOTICE, REF	PORT,	OR OTHER DATA
TYP	TYPE OF SUBMISSION TYPE OF ACTIO			ON	
	Notice of Intent		Abandonment		Change of Plans
r D	/	1 —	Recompletion	Ļ	New Construction
<u> </u>	Subsequent Report		Plugging Back Casing Repair	Ĭ	Non-Routine Fracturing Water Shur-Off
	Final Abandomnant Notice	1	Altering Casing Footages		Conversion to Injection
			Other		Dispose Water Note: Report results of multiple completion on Well
13. Describe Propose	ed or Completed Operations (Clearly state a	all pertinent details, and give	pertinent dates, including estimated date of st		completion or Recompletion Report and Log form.) proposed work. If well is directionally drilled
give subsurf	face locations and measured and true verti	ical depths for all markers	and zones pertinent to this work.)"		
Incorrect for	footages shown on bootages are 770', FL	Form 3160-3 & 1978' FEL	as shown on plat.		
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	\sim 0		c	c: BLM	I, Colby, OCD (via BLM)
14. I hereby certify,	that the foregoing is true and correct	Co	nsultant (505) 46 6 ្ត	∂ ₽₽τι	ED FOR RECORD -00
Signed(This space for	Pederal or State office use)	Title			Date
Approved by Conditions of ap	oproval, if any:	Title		· · · · · · · · · · · · · · · · · · ·	
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