Form 3160-5 (November 1983)		UNITED STATES	FRIOR	SUBMIT IN TRIPLICATE (Other instructions of		Budget Bureau No. 1004-0135 Expires August 31, 1985 5. LEASE DESIGNATION AND SERIAL RO.			
(Formerly 9-331)	DEPARTMENT OF THE INTERIOR W			TTION BIOL)		14-20-603-733			
				WELLS			O S - 7 S S SETT		
(Do not use the	NDRY NOTI PROPOSE OF THE SECOND SECON	CES AND REPORT THE TOTAL PORT OF THE PORT OF THE PORT PERMIT—" for the port of	15 UN plug back t uch proposs	WELLS a different rese	tvoir.	Nav			
1.						7. UNET AGREEMEN			
WELL GAS WELL		- Water Injec				Horseshoe	Gallup Unit		
2. HAMB OF OPRRATOR		and Gas Compa			of	8. PARM OR LEASE			
3. ADDRESS OF OPERATO		Richfield Com 17th Street,	ipany.	· C	`	9. WELL NO.	Gallup Unit		
P. O. Box 5540, Denver, Colo. 8021700 47							26		
	Report location ci-	early and in accordance with			7. L	10. PIBLD AND POO	- -		
Unit "D", 600' FNL & 660' FWL, Section 5							Horseshoe Gallup		
(No API # As	•	α 000° FWL, Se	etion	2 20 10 10 10 10 10 10 10 10 10 10 10 10 10	N. C.	SURVEY OR A	REA		
14. PRRMIT NO.		, 15. ELEVATIONS (Show wheth	er or er or		PAC	Sec. 5-1			
		5384'		,	9	San Juan	New Mexico		
16.	Charle A a	propriate Box To Indica		/ ht .: 5					
	NOTICE OF INTENT				20143903	NT EXPORT OF:			
TEST WATER SEUT-	<u> </u>	TLL OR ALTER CASING		WATER BEUT-OF		RBPAIRIF	WELL		
PRACTURE TREAT SHOOT OR ACIDIES		SANDON® X		PRACTURE TREAT			G CABING		
REPAIR WELL		ANGE PLANS		(Other)		ABANDON			
(Other)				(Nors: Re Completion	or Recomplet	f multiple completi	form.)		
17. DESCRIBE PROPOSED O proposed work. If nent to this work.)	wen in direction	ATIONS (Clearly state all pers ally drilled, give subsurface	locations a	U	4				
well, as per A review of	the atta this well	pany, Operator ached P & A Pro l indicates the of activation	ocedur at the	e.			_		
					MAY 1 & DIST	5 1985 V. DIV.			
	of Land	nce with the r Management, Fai							
8. I hereby certify that SIGNED	The Rose	BRS TITLE	Dist.	Prod. Su	pt.	DATE May	y 8, 198 ⁻		
(This space for Feder	TAL OF SUATO OFFICE	use j							
APPROVED BY CONDITIONS OF AP	PROVAL, IF AN	TITLE _				DATE			

*See Instructions on Reverse Side