

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

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

5. Lease Designation and Serial No.
14-20-604-1951

6. If Indian, Allottee or Tribe Name
Ute

7. If Unit or CA. Agreement Designation
Horseshoe Gallup Unit

8. Well Name and No.
HSGU #210

9. API Well No.
30-045-10082

10. Field and Pool, or Exploratory Area
Horseshoe Gallup

11. County or Parish, State
San Juan, New Mexico

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Central Resources, Inc.

3. Address and Telephone No.
P.O. Box 2810, Farmington, New Mexico 87499 (505)326-3325

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
330' FSL, 2310' FEL, Sec. 33, T31N, R16W

12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

TYPE OF ACTION

<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 <u>Return to Production</u>	<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 we 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 production on April 25, 1997. The well tested 3 BOPD and 9 BWPD.

RECEIVED
MAY 6 1997
070 FARMINGTON, NM
97 MAY -5 PM12:50

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

Signed Thomas W. DeLong Title Superintendent/Engineer Date May 2, 1997

(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 State fictitious or fraudulent statements or representations as to any manner within its jurisdiction.

*See Instruction on Reverse Side

ACCEPTED FOR RECORD

MAY 6 1997

FARMINGTON DISTRICT OFFICE

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NMOCD