Form 3160-5		FORM APPROVED
(June 1990)		Budget Bureau No. 1004-0135
UNITED STATES		Expires: March 31, 1993
DEPARTMENT OF THE INTERIOR		5. Lease Designation and Serial No.
BUREAU OF LAND MANAGEMENT		14-20-604-1951
SUNDRY NOTICES AND REPORTS ON WELLS		6. If Indian, Allottee or Tribe Name
		Ute
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		Horseshoe Gallup Unit
1. Type of Well         Gas Well	Other 189101	8. Well Name and No. HGU #170
2. Name of Operator	60	9. API Well No.
Central Resources, Inc. c/o Playa Mineral	s & Energy Anc.	30-045-10286
3. Address and Telephone No.		10. Field and Pool, or Exploratory Area
650 N. Sam Houston Pkwy. E. Suite 500	Houston, Tx. (281) 951 380 900	Horseshoe Gallup Unit
4. Location of Well (Footage, Sec., T., R., M., or Surve	y Description	11. County or Parish, State
365' FSL, 405' FWL, Sec. 27, T31N, R16	w S G G G G G G G G G G G G G G G G G G	San Juan County, NM
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION TYPE OF ACTION		
	Abandohment	Change of Plans
X Notice of Intent	Recompletion	New Construction
	Plugging Back	Non-Routine Fracturing
Subsequent Report	Casing Repair	Water Shut-Off
	Altering Casing	
Final Abandonment Notice	X Other Workover	Conversion to Injection
I mai Abandonment Notice		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.)*		
Earlier this year work was done to restore production. Attempt failed and well was shut-in.		
However, this well was re-evaluated and is scheduled for refracture of the upper perforations during		
January 2001 as part of Phase 1 of the Workover Program. It is anticipated that the well will be		
	orkover Program. It is anticipated that the w	ell will be
returned to production at that time.		
14. I hereby certify that the foregoints is true and correct	ct	
Signed Telestra Della	Title Regulatory Compliance	Date 08/01/00
Kenneth W. Jackson		
(This space for Federal or State office use)		
Approved by	Title	Date 8/7/00
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