

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED
BLM MAIL ROOM

95 OCT 10 PM 2:46

Sundry Notices and Reports on Wells

1. Type of Well <input type="checkbox"/> Oil <input type="checkbox"/> Gas <input checked="" type="checkbox"/> Other - Water Injection Well		5. Lease Number 070 FARMINGTON, NM 14-20-603-734
2. Name of Operator Convest Energy Corporation (c/o Central Resources, Inc.)		6. If Indian, Allottee or Tribe name Navajo
3. Address & Phone No. of Operator 2401 Fountain View Drive Suite 700 Houston, TX 77057-4862 (713) 780-1952		7. Unit Agreement Name Horseshoe Gallup
4. Location of Well, Footage, Sec., T, R, M H-29-31N-16W 1980' FNL & 417' FEL		8. Well Name & Number HGU #25
		9. API Well No. 30-045-10393
		10. Field and Pool Horseshoe Gallup
		11. County and State San Juan, New Mexico

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Dispose Water
	<input checked="" type="checkbox"/> Other - LTSI
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut Off
	<input type="checkbox"/> Conv. to injection

13. Describe Proposed or Completed Operations

This well is currently shut-in.

Convest on behalf of Central Resources, Inc. is requesting LTSI status from the BLM until such time it is economically feasible to return this well to active injection status.

This well is currently in compliance with all NMOCD UIC requirements and is scheduled for an MIT prior to 9/22/97.

THIS APPROVAL EXPIRES OCT 01 1997

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

Signed Dianna K. Fairhurst Title Consulting Engineer Date 10/07/94
Dianna K. Fairhurst

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: _____

APPROVED

OCT 10 1995

DISTRICT MANAGER