160-5 Form

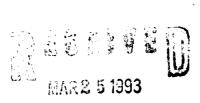
## UNITED STATES

FORM APPROVED

Budget Bureau No. 1004-0133
Expires: March 31, 1993

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  Type of Well	une 1990)	TUE INTERIOR	Expires: March 31, 1993
SUBMIT IN TRIPLICATE  Type of Well	DEPARTMENT OF	THE INTERIOR	
SUNDRY NOTICES AND REPORTS  To not use this form for proposals to artificial or to deepen or reentry to a different reservoir Use "APPLICATION FOR PERMIT." for such proposals  SUBMIT IN TRIPLICATE  7. If Unit or CA, Agreement Designation  Horseshoe Gallup Unit 8. Well Name and No.  Name of Operator Vantage Point Operating Company 9. Address and Telephone No. 2401 Fountain View Dr., Suite 700, Houston, TX 77057  10. Field and Pool, or Exploratory Area Horseshoe Gallup  11. County or Parish, State  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION New Construction  Subsequent Report Plugging Back Casing Repair Water Shut-Off Casing Repair  Altering Casing Notice of Intent  Altering Casing Altering Casing Conception on Well Completion or	BUREAU OF LAND	MANAGE:MEN I	3. Leage Bedignation and Campaign
SUNDRY NOTICES AND REPORTS  To not use this form for proposals to artificial or to deepen or reentry to a different reservoir Use "APPLICATION FOR PERMIT." for such proposals  SUBMIT IN TRIPLICATE  7. If Unit or CA, Agreement Designation  Horseshoe Gallup Unit 8. Well Name and No.  Name of Operator Vantage Point Operating Company 9. Address and Telephone No. 2401 Fountain View Dr., Suite 700, Houston, TX 77057  10. Field and Pool, or Exploratory Area Horseshoe Gallup  11. County or Parish, State  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION New Construction  Subsequent Report Plugging Back Casing Repair Water Shut-Off Casing Repair  Altering Casing Notice of Intent  Altering Casing Altering Casing Conception on Well Completion or			14-20-603-2022
Do not use this form for proposals to drill of to deepen or reenity to a different reservoir  Use "APPLICATION FOR PERMIT." for such proposals  SUBMIT IN TRIPLICATE  7. If Unit or CA, Agreement Designation  Horseshoe Gallup Unit  8. Well Name and No.  Horseshoe Gallup Unit #304  9. API Well No.  2401 Fountain View Dr., Suite 700, Houston, TX 77057  10. Field and Pool, or Exploratory Area  Horseshoe Gallup  10. Field and Pool, or Exploratory Area  Horseshoe Gallup  11. Country or Parish, State  San Juan, New Mexico  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back  Non-Rountine Fracturing  X Atendonmen:  Casing Repair  Water Shut-Off  Conversion to Injection  Altering Casing  X Other  Shut In  Completion on Well Completion or	SUNDRY NOTICES AND RE	PORTS ON WELLS	6 If Indian Allottee or Tribe Name
SUBMIT IN TRIPLICATE  SUBMIT IN TRIPLICATE  Type of Well	Do not use this form for proposals to drill or to deepen	or reentry	o. II material and a second
SUBMIT IN TRIPLICATE  Type of Well  SUBMIT IN TRIPLICATE  Horseshoe Gallup Unit  8. Well Name and No.  Horseshoe Gallup Unit #304  Horseshoe Gallup Unit #304  9. API Well No.  300452863400S1  10. Field and Pool, or Exploratory Area  Horseshoe Gallup  11. Country or Parish, State  Horseshoe Gallup  11. Country or Parish, State  San Juan, New Mexico  TYPE OF SUBMISSION  Notice of Intent  Recompletion  Recompletion  Subsequent Report  Plugging Back  Non-Rountine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water  (Note: Report results of multiple completion or Well Completion or	to a different reservoir		Navaio
Type of Well    X oi	Use "APPLICATION FOR PERMIT " for su	ch proposals	
Type of Well   X Oil   Gas   Other	SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
Name of Operator   8   Well Name and No.     Name of Operator   Yantage Point Operating Company   9   Address and Telephone No.   2401 Fountain View Dr., Suite 700, Houston, TX 77057   713-780-1952   300452863400S1     Location of Well (Footage, Sec., T, R, M., or Survey Description)   10. Field and Pool, or Exploratory Area   Horseshoe Gallup     Horseshoe Gallup   11. County or Parish, State     San Juan, New Mexico   San Juan, New Mexico     CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA     TYPE OF SUBMISSION   X Abandonmen:   Change of Plans     Notice of Intent   X Abandonmen:   Change of Plans     New Construction   New Construction     New Construction   Non-Rountine Fracturing     Gasing Repair   Water Shut-Off     Casing Repair   Conversion to Injection     Dispose Water   (Note, Report results of multiple completion on Well Completion or     Completion on Well Completion or     Completion on Well Completion or     Note Completion or     Note Completion or     Note Report results of multiple     Completion on Well Completion or     Note of multiple     Completion or     Completion o			
Name of Operator   8   Well Name and No.     Name of Operator   Yantage Point Operating Company   9   Address and Telephone No.   2401 Fountain View Dr., Suite 700, Houston, TX 77057   713-780-1952   300452863400S1     Location of Well (Footage, Sec., T, R, M., or Survey Description)   10. Field and Pool, or Exploratory Area   Horseshoe Gallup     Horseshoe Gallup   11. County or Parish, State     San Juan, New Mexico   San Juan, New Mexico     CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA     TYPE OF SUBMISSION   X Abandonmen:   Change of Plans     Notice of Intent   X Abandonmen:   Change of Plans     New Construction   New Construction     New Construction   Non-Rountine Fracturing     Gasing Repair   Water Shut-Off     Casing Repair   Conversion to Injection     Dispose Water   (Note, Report results of multiple completion on Well Completion or     Completion on Well Completion or     Completion on Well Completion or     Note Completion or     Note Completion or     Note Report results of multiple     Completion on Well Completion or     Note of multiple     Completion or     Completion o	T\$18/all		0.11.11.3
Name of Operator			Horseshoe Gallup Unit
Vantage Point Operating Company 3 Address and Telephone No. 2401 Fountain View Dr., Suite 700, Houston, TX 77057 3 Location of Well (Footage, Sec., T. R., M., or Survey Description)  605' FNL & 2010' FEL Sec. 23-T31N-R17W NMPM  11. County or Parish, State  San Juan, New Mexico  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Plugging Back Casing Repair  Water Shut-Off Conversion to Injection  X Other Shut In  (Note: Report results of multiple completion or Well Completion or	X Oil Gas Cottle		8. Well Name and No.
Vantage Point Operating Company 3 Address and Telephone No. 2401 Fountain View Dr., Suite 700, Houston, TX 77057 3 Location of Well (Footage, Sec., T. R., M., or Survey Description)  605' FNL & 2010' FEL Sec. 23-T31N-R17W NMPM  11. County or Parish, State  San Juan, New Mexico  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Plugging Back Casing Repair  Water Shut-Off Conversion to Injection  X Other Shut In  (Note: Report results of multiple completion or Well Completion or			
Address and Telephone No.  2401 Fountain View Dr., Suite 700, Houston, TX 77057  713-780-1952  300452863400S1  10. Field and Pool, or Exploratory Area  Horseshoe Gallup  11. County or Parish, State  San Juan, New Mexico  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Abandonmen:  Recompletion  Recompletion  Subsequent Report  Plugging Back  Plugging Back  Water Shut-Off  Conversion to Injection  Altering Casing  Altering Casing  Altering Casing  Notice Report results of multiple completion on Well Completion or	Name of Operator		Horseshoe Gallup Unit #304
2401 Fountain View Dr., Suite 700, Houston, TX //057 /13-780-1952 10. Field and Pool, or Exploratory Area Horseshoe Gallup  10. Field and Pool, or Exploratory Area Horseshoe Gallup  11. County or Parish, State  San Juan, New Mexico  22 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back Casing Repair Water Shut-Off Altering Casing X Other Shut In Obspose Water (Note: Report results of multiple completion or Well Completion or			
Horseshoe Gallup  11. Country or Parish, State  San Juan, New Mexico  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back Casing Repair  Water Shut-Off  Attering Casing  X Other Shut In  (Note. Report results of multiple completion or Well Completion or	3. Address and Telephone No.	c 77057 713-780-1952	300452863400S1
## Horseshoe Gallup  11. County or Parish, State    San Juan, New Mexico	2401 Fountain View Dr., Suite 700, Flodstori, 17	tion)	10. Field and Pool, or Exploratory Area
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San Juan, New Mexico  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back Casing Repair  Water Shut-Off Conversion to Injection  X Other Shut In  ONCE Report results of multiple completion or			Horseshoe Gallup
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CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Plugging Back Plugging Back Casing Repair  Final Abandonment Notice  X Other  Shut In  (Note: Report results of multiple completion or	605" FNL & 2010" FEL Sec. 25-13111-1111	, INITIALITY	
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TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back Casing Repair  Water Shut-Off  Conversion to Injection  X Other  Shut In  Change of Plans  New Construction  Non-Rountine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water  (Note: Report results of multiple completion or			
TYPE OF SUBMISSION  X Notice of Intent  Recompletion  Subsequent Report  Plugging Back Casing Repair  Water Shut-Off  Conversion to Injection  X Other  Shut In  (Note: Report results of multiple completion or	CHECK ADDDODDIATE BO	OX(S) TO INDICATE NATURE OF NOT	ICE, REPORT, OR OTHER DATA
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Recompletion  Subsequent Report  Plugging Back  Casing Repair  Water Shut-Off  Altering Casing  Shut In  Other  Shut In  (Note: Report results of multiple completion or Well Completion or		X Abandonmen:	Change of Plans
Subsequent Report    Plugging Back	X Notice of Interit		New Construction
Subsequent Report  Casing Repair  Water Shut-Off  Casing Repair  Conversion to Injection  X Other  Shut In  (Note: Report results of multiple completion or Well Completion or	<del></del>		Non-Rountine Fracturing
Final Abandonment Notice  Altering Casing  Conversion to Injection  X Other  Shut In  Dispose Water  (Note: Report results of multiple completion or Well Completion or	Subsequent Report	H ***	
Final Abandonment Notice  X Other Shut In Dispose Water  (Note: Report results of multiple completion on Well Completion or		Casing Repair	Water Shut-Off
X Other Shut In Dispose Water  (Note: Report results of multiple completion on Well Completion or	Final Abandonment Notice	Altering Casing	Conversion to Injection
(Note: Report results of multiple completion on Well Completion or		X Other Shut In	Dispose Water
completion on Well Completion or			(Note: Report results of multiple
Recompletion Report and Log form.)		Coff. M. States	completion on Well Completion or
			Recompletion Report and Log form.)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give 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.)\*



OIL CON. DIV.

hereby certify that the foregoing is true and correct Signed Signed Signed		Marketing/Operations Analyst	Date	3/5/93
	- Hite	marketing operation		ACCEPTED FOR RECORD
This space for Federal or State office use)	Title		Date	ACCEPTED TOTAL
Approved by  Conditions of approval, if any:				