Form 3160-5 (November 1994)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for preposals to the other an

FORM APPRØVED
Budget Bureau No. 1004-0135
Expires November 30, 2000

5. Lease Serial No

Ute	4.4	00	chi	~
iure-	14	- ZU:	· 0/U4 ·	. 02

6. If Indian, Allottee or Tribe Name

abandoned well. Use	(Plana (MRD) for supp proposals.	Ute Mountain Ute Indian Trib		
SUBMIT IN TRIPLICATE	- order (astructions on reverse side CEIVED	7. If Unit or CA/Agreement, Name and/or No. 22645		
Oil X Gas Other  Name of Operator	11 COM 9 OCT 1 2 1999	8. Well Name and No. Ute Indians A #26		
Cross Timbers Operating Company  Ba. Address	3b. Phoneby (included Manageme)	9. API Well No. 30-045-29868		
Bldg K, Suite 1, Farmington, NM	505/324-109ango Colorado	10. Field and Pool, or Exploratory Area		
Location of Well (Footage, Sec., T., R., M., or Survey Descrip		Ute Dome Paradox		
Surface - 570' FSL & 1045' FEL, Sec	11. County or Parish, State			
Proposed Prod Zone - 850' FSL & 145	U FEE, UNIT EUR U	San Juan Co. NM		
12. CHECK APPROPRI	IATE BOX(ES) TO INDICATE NATUREOF NOTICE, REPOR			
TYPE OF SUBMISSION	TYPE OF ACTION			
X Notice of Intent	Acidize Deepen Product	ion (Start/Resume) Water Shut-Off		
Subsequent Report	Alter Casing Fracture Treat Reclama			
Subsequent Report	Casing Repair New Construction Recomp			
Final Abandonment Notice		arily Abandon		
	Convert to Injection Plug Back Water D	Disposal		
following completion of the involved operations. If testing has been completed. Final AbandonmentN determined that the final site is ready for final inspect	23 on approved Form 3160-3, dated 3/9/99.	new interval, a Form 3160-4 shall be filed once ion, have been completed, and the operator has		
Grade, Size, Weight/Foot Production Casing	ORIGINAL REVISED 4-1/2", 11.6#, N-80 5-1/2", 17#, K-55	& J-55, LTC		
	]] 5.46, Burst 1.65, Ten 1.82) ]] 1.19, Burst 1.95, Ten 1.99)			
Administrative Order NSL-4171				
	. Title			
14. Thereby certify that the foregoing is true and correct Name(Printed/Typed)  Bobby L. Smith	1 (-1)	ons Manager		
	Date 10/05/99			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE				
Approved by flyse K. Auringer	MUCEPALE STAFF CHIEF	OQ Pate 2 0 1998		
Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations the	of this notice does not warrant or office of those rights in the subject lease ereon.			

Fitle 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any departmentor agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.