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Form 3160-5	UNITED STATES	SUBMIT IN TRIPLICATE.	Budget Bureau No. 1004-0135 Expires August 31, 1985
(November 1983) (Formerly 9-331)	DEPARTMENT OF THE INTERIOR	(Other instructions on reverse side)	5. LEASE DESIGNATION AND SERIAL NO.
(1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	BUREAU OF LAND MANAGEMENT		14-20 1 - 20 001
<del></del>		perfiveû	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
SU	ndry notices and reports on	WELLES H	the state of the s
(Do not use th	is form for proposals to drill or to deepen or plug back Use "APPLICATION FOR PERMIT—" for such propos	to a different reservoir.	1/
1.			7. UNIT AGRESSIANT NAME
OIL GAS	· · /	98 MAR 27 PH 12: 43	C. UNIT EGEGEMENT NAME
WELL WELL	U OTHER INJection		
2. NAME OF OPERATOR	1 7	070 FARMINGTON, NIV	8. FARM OR LEASE NAME
2/st Ce	entury Investment Co	U/U FAIRMAN	
3. ADDRESS OF OPERAT	OR /	1 0	9. WELL NO. Mavelo
locames 4	loos les Drawer 1480 (Dr	tez Co 81321	3(30-045-11335
4. LOCATION OF WELL	(Report location clearly and in accordance with any Stat	te requirements.	10. PIELD AND POOL, OR WILDCAT
See also space 17 b At surface	<i>⊃1)</i> 'S '		Mesa Gallus
10 660- FSL + 1980 FWL			11. SBC., T., R., M., OR BLE, AND
sec 124: T32N R18W			Sec 24
Sec 24.	132N K18W		T== 21 0 1011
14. PERMIT NO.	15. ELEVATIONS (Show whether DF. RT.	CP etc.)	12. COUNTY OR PARISH 13. STATE
14. FBUNIL NO.	to. BEZAKTIONS (Show whether br, Rt,	un, etc.)	12. COUNTY OF PARISH 13. STATE
			San JUAN I MM
Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data			
	NOTICE OF INTENTION TO:	SUBSEQUI	ENT EMPORT OF:
TEST WATER SHUT	OFF PULL OR ALTER CASING	WATER SHUT-OFF	REPAIRING WELL
PRACTURE TREAT	MULTIPLE COMPLETE	FRACTURE TREATMENT	ALTERING CASING
SHOOT OF ACIDIZE	ABANDON*	SHOOTING OR ACIDIZING	ABANDONMENT*
REPAIR WELL	CHANGE PLANS	(Other)	· —
(Other) retur	on to Poli	(NOTE: Report results	of multiple completion on Well
	11 60 1000 ===		tion Report and Log form.)
17. 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 sones perti-			
nent to this work.	) •		11 + -
	Plan to convert	- This we	11 60 a
	Plan to convert pow within ?		
	pow within 9	10 days	
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		MUL 0 1 1998	<b>P</b> PPOIII。第 200
	THIS APPROVAL EXPINES	OOL 0 1 1339	-
			3
18. I hereby corfling the	at the foregoing is true and correct	/	1 ,1-
SIGNED	W & Moosley TITLE age	ent	DATE 3/24/98
//			- var qualific
	deral or State office use)		
	9/ Duane W. Spencer TITLE		51mm ADD - 1 Man
CONDITIONS OF	APPROVAL, IF ANY:		DATEAPR   1998
			1
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\*See Instructions on Reverse Side