DEPARTMEN BURGAU OF I  OCO FECERAL DRY MOTICES  Do not use this form for proposals to dri Use APPLICATION FOR	AND MANACEMENT 1001 W. GIRA	FORM APPROVED  Dist Boget Bureau No. 1004-0135  Expires: March 31, 1993  5 AMERICAN OF THE PROPERTY OF THE PRO
SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
1. Type of Well  Oil Well X Well Other  2. Name of Operator		8. Well Name and No.
Jack J. Grynberg	Tel.(303)850-7490	Hobbs Canyon Fed #1  9. API Well No.
3. Address and Telephone No. 5299 DTC Blvd., Suite 500, Greenwood Village, Colorado 80111		30-005-61367  10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey De 1980 FSL & 660 FEL Section 12, T 6S, R 24E	escription)	Abo 11. County or Parish, State Chaves, NM
12. CHECK APPROPRIATE BOX(	s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent  Subsequent Report  Final Abandonment Notice	Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other	Change of Plans  New Construction  Non-Routine Fracturing  Water Shut-Off  Conversion to Injection  Dispose Water (Note. Report results of multiple completion on Well
	I pertinent details, and give pertinent dates, including estimated date of startin al depths for all markers and zones pertinent to this work.)*	g any proposed work. If well is directionally drilled,
	· AND CE CO	
14. I hereby certify that the foregoing is true and arrect Signed X M M M M M M M M M M M M M M M M M M	Title Prod. Manager	Date7-30-2002
(This space for Federal or State office use)  Approved by Conditions of approval, if any:	Title	Date <u>E/E/6</u> 2