

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

5. Lease Serial No.
Contract # 398
6. If Indian, Allottee or Tribe Name
Jicarilla Apache
7. If Unit or CA/Agreement, Name and/or N

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other
2. Name of Operator
Elm Ridge Resources, Inc.
3a. Address
PO Box 156, Bloomfield, NM 87413
3b. Phone No. (include area code)
505-632-3476
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
800 FNL X 1650 FWL
Sec. 15-T23N-R4W

8. Well Name and No.
Martin Whittaker #28
9. API Well No.
30-039-23453
10. Field and Pool, or Exploratory Area
Widemat S. Lin. / GAI-DAR
11. County or Parish, State
Rio Arriba County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize <input type="checkbox"/> Deepen <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing <input type="checkbox"/> Fracture Treat <input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair <input type="checkbox"/> New Construction <input type="checkbox"/> Recomplete <input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input checked="" type="checkbox"/> Temporarily Abandon _____
	<input type="checkbox"/> Convert to Injection <input type="checkbox"/> Plug Back <input type="checkbox"/> Water Disposal _____

13. Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once Testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Elm Ridge resources, Inc did an MIT test on the above referenced well on 4-5-05. The test passed and we would like to request that the well be TA to evaluate its up hole potential. *until 10/1/05*

RECEIVED
 070 FARMINGTON NM
 2005 APR 7 PM 12 34

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

Name (Printed/Typed) Amy Mackey	Title Production Assistant
Signature <i>Amy Mackey</i>	Date April 6, 2005

THIS SPACE FOR FEDERAL OR STATE USE

Approved by Original Signed: Stephen Mason	Title	Date APR 13 2005
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Office	

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

(Instructions on reverse)



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

MECHANICAL INTEGRITY TEST REPORT (TA OR UIC)

Date of Test April 5, 2005 Operator Elmridge Resources Inc. API # 30-039-23453

Property Name Martin Whittaker Well # 28 Location: Unit C Sec 15 Twn 27 Rge 4

Land Type:

State _____
Federal _____
Private _____
Indian X

Well Type:

Water Injection _____
Salt Water Disposal _____
Gas Injection _____
Producing Oil/Gas X
Pressure observation _____

Temporarily Abandoned Well (Y/N): Y TA Expires: _____

Casing Pres. 0 Tbg. SI Pres. _____ Max. Inj. Pres. _____
Bradenhead Pres. 0 Tbg. Inj. Pres. _____
Tubing Pres. 0
Int. Casing Pres. _____

Pressured annulus up to 560 psi. for 30 mins. Test passed failed

REMARKS: START MIT @ 11:07 AM. PRESSURE UP CASING
TO 560 PSI AT START OF TEST. END TEST @ 11:37 AM.
CASING PRESSURE @ END OF TEST 530 PSI.

By Richard Graves
(Operator Representative)

Witness _____
(NMOCD)

Production Foreman
(Position)

Revised 02-11-02

NOON

PRINTED IN U.S.A.

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2

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4

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6 PM

7

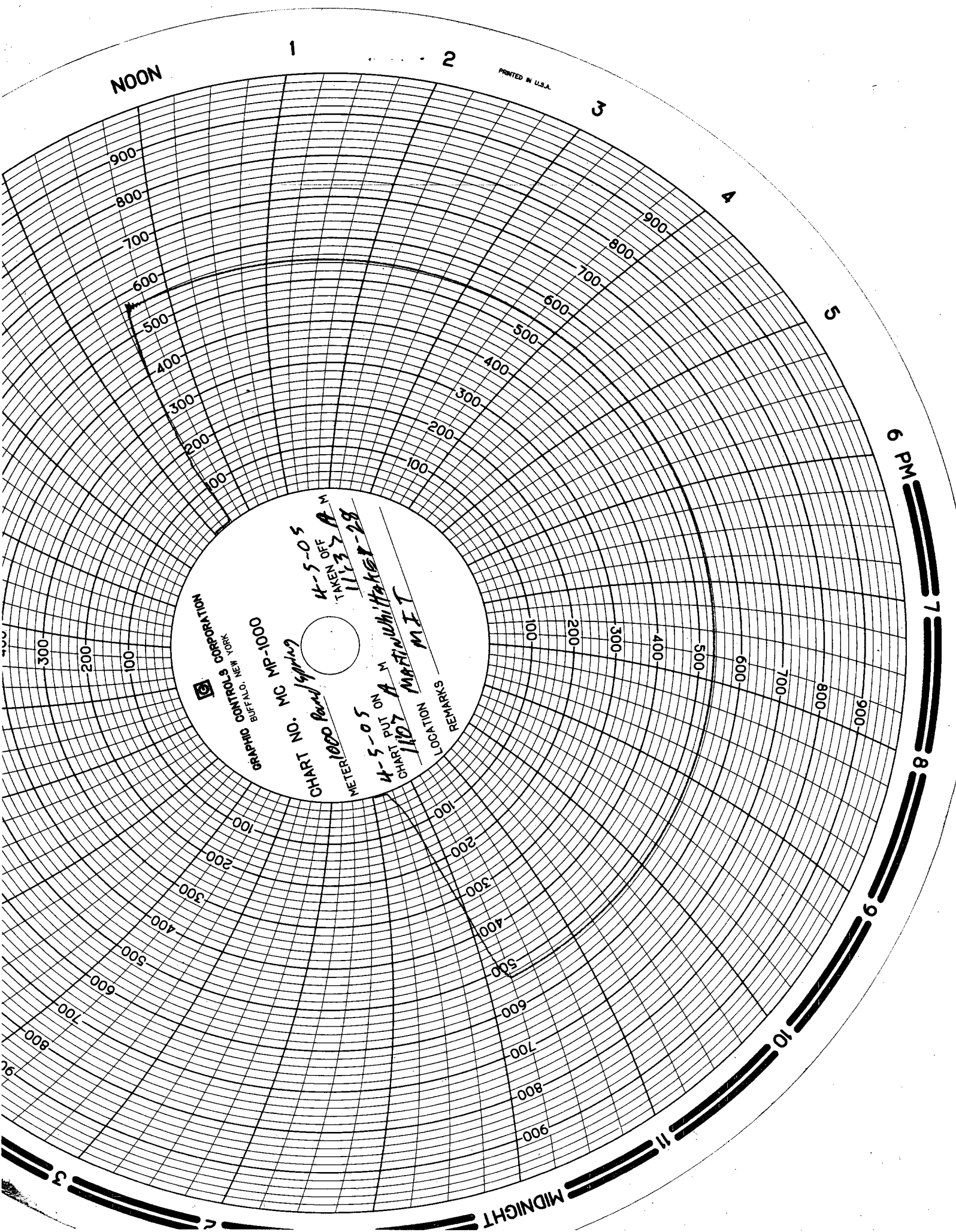
8

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11

MIDNIGHT



SEARCHING CONTROLS CORPORATION
 BUFFALO, NEW YORK

CHART NO. MC NP-1000

1000 Round / 1/2" dia

4-5-05

TAKEN OFF

1133 A

M

METER

PUT ON

M

1107 MARTIN MILITARY

MI T

LOCATION

REMARKS