Form 3160-5 (April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

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J.	Least Della	110.

SUNDRY I	SF-078384					
Do not use this abandoned wel	6. If India	n, Allottee or Tribe Name				
SUBMIT IN TRIF	7. If Unit or CA/Agreement, Name and/or No.					
1. Type of Well Oil Well 🗆 🗸	8. Well Name and No. Newsom B #18					
2. Name of Operator Silver Creek O	oil and Gas, LLC			9 API W		
3a Address 201 W. California Street, Gaines	3b. Phone No. (include area code) 940 665-4373			3-23917		
4. Location of Well (Footage, Sec., T.,				10. Field and Pool, or Exploratory Area  Ballard Pictured Cliffs (Gas)		
Section 8 T26N & R8W, 895 FN	11. County or Parish, State  San Juan County, New Mexico					
12. CHECK APP	PROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOTICE, R	REPORT, O	R OTHER DATA	
TYPE OF SUBMISSION		PE OF ACTION				
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize  Alter Casing  Casing Repair  Change Plans  Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (St Reclamation Recomplete Temporarily Al Water Disposal	bandon	Water Shut-Off Well Integrity Other Operator Change	
Attach the Bond under which the following completion of the invo testing has been completed. Fina determined that the site is ready for the street of the street is ready for the street of the street	ionally or recomplete horizontall work will be performed or provived operations. If the operation I Abandonment Notices shall be or final inspection.)	ly, give subsurface locatio ide the Bond No. on file v results in a multiple comp filed only after all require	ns and measured and tr vith BLM/BIA. Requir eletion or recompletion ments, including reclan	ue vertical depred subsequent in a new intervention, have be	ths of all pertinent markers and zones, reports shall be filed within 30 days al, a Form 3160-4 shall be filed once en completed, and the operator has	

DIST. 3

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)  Anthony S. Cutia	Title	Operations Manager										
Signature Oull & a		10/24/20	12									
THIS SPACE FOR FEDERAL OR STATE OFFICE USE												
Approved by As/ Monica Tilden		Title LIK	Date	JUN	20	2013						
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject leads to which would entitle the applicant to conduct operations thereon.		Office FFO	***									

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 anymatter within its jurisdiction.