Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

	NOTICES AND REPORT		NMNM-61273
		drill or reenter an MAR 0	6 Mill Indian, Allottee or Tribe Name
abandoned well.	Use Form 3160-3 (APD)	for such proposals.	
		1 6010111111111111111111111111111111111	154 70 [[Unit or CA/Agreement, Name and/or N
SUBMIT IN TRIPL	ICATE – Other instru	ctions on reverse sideand	Мсрадеть.
Type of Well			— ^{N/A}
Oil Well Gas Well	Other		8. Well Name and No.
2. Name of Operator	Other		West Bisti Coal 23-1T
Elm Ridge Exploration CO, L	LLC		9. API Well No.
3a. Address		3b. Phone No. (include area code)	30-045-32223
PO Box 156, Bloomfield, NM	1 87413	505-632-3476 x203	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec.,			Basin Fruitland Coal
972' FSL X 870' FEL			11. County or Parish, State
			Cara lucas Causata Alba
"P" Sec.23-T25N-R13W			San Juan County, NM
12. CHECK APPROPRIATE BOX	X(ES) TO INDICATE NAT	URE OF NOTICE, REPORT, OR	OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION		
Notice of Intent	Acidize	Deepen X Produc	tion (Start/Resume) Water Shut-Off
	Alter Casing	Fracture Treat Reclam	· · · · · · · · · · · · · · · · · · ·
X Subsequent Report	Casing Repair	New Construction Recom	plete Other
	Change Plans		rarily Abandon
Final Abandonment Notice	Convert to Injection	Plug Back Water	Disposal
If the proposal is to deepen directionally Attach the Bond under which the work Following completion of the involved open	or recomplete horizontally, give s will be performed or provide the le erations. If the operation results in andonment Notices shall be filed of	subsurface locations and measured and true of Bond No. on file with BLM/BIA. Required a multiple completion or recompletion in a	proposed work and approximate duration thereof. vertical depths of all pertinent markers and zones. I subsequent reports shall be filed within 30 days new interval, a Form 3160-4 shall be filed once stion, have been completed, and the operator has
The above well has been ret	turned to production as	of 3-4-14	
			ROUD MAR 13"
			ON COME DI

14 UIL CUNS. DIV.

DIST. 3

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Amy Mackey	Title	r. Regulatory Supervisor	
Signature	Date March 4, 2014		
THIS SPA	CE FOR FEDERAL OR STATE I	USE	
Approved by	Title	Date	
Conditions of approval, if any, are attached. Approval of this notice doe certify that the applicant holds legal or equitable title to those rights in twhich would entitle the applicant to conduct operations thereon.		ACCEPTED FOR RECORD	
Title 18 U.S.C. Section 1001, makes it a crime for any person kn fraudulent statements or representations as to any matter within		y department or agency of the United States any false, fictit out MAR 6 2014	
(Instructions on reverse)			
•		FARMINGTON FIELD OFFICE	