Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135

APR 11 2014 5. Le

	Eχ	pires	July	31,
ase Seri	al	No.		

SUNDRY NOTICES AND REPORTS ON WELLS					NMSF-078062A	
Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.					io€ If Indian, Allottee or Tribe Name	
abandoned well. Use Form 3160-3 (APD) for such proposals.					emen.	
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SUBMIT IN TRIPL 1. Type of Well	ICATE – Other instru	ıctions	on reverse	e side	N/A	
Oil Well Gas Well Other					8. Well Name and No.	
2. Name of Operator				East Bisti Coal 6 1T		
Elm Ridge Resources, Inc.					9. API Well No.	
3a. Address 3b. Phone No. (include area code)				30-045-32712		
PO Box 156, Bloomfield, NM 87413		505-632-3476 x201		1	10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Basin Fruitland Coal		
2180' FSL X 855' FEL			11. County or Parish, State			
"I" - Sec.6-T25N-R11W				:	San Juan County, NM	
12. CHECK APPROPRIATE BOX(E	S) TO INDICATE NATURE	OF NOT	CE, REPORT	, OR OTHER DA	TA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent	Acidize	Deep			Start/Resume)	
Subsequent Report	Alter Casing Casing Repair	☐ New	ture Treat Construction	Reclamation Recomplete	Other	
Final Abandonment Notice	Change Plans Convert to Injection	= ~	and Abandon Back	Temporarily Water Dispos		
	<u> </u>				osed work and approximate duration thereof.	
If the proposal is to deepen directionally Attach the Bond under which the work Following completion of the involved op-	y or recomplete horizontally, give s will be performed or provide the erations. If the operation results in andonment Notices shall be filed of	subsurface le Bond No. c a multiple	ocations and meas in file with BLM/ completion or rec	sured and true vertical /BIA. Required subs completion in a new	il depths of all pertinent markers and zones, sequent reports shall be filed within 30 days interval, a Form 3160-4 shall be filed once have been completed, and the operator has	
This well was returned to produ	uction as of 4-8-14.					
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					RCVD APR 17'14	
					OIL CONS. DIV.	
					DIST. 3	
/						
14. I hereby certify that the foregring is	true and correct					
Name (Printed/Typed)	1ackev	Title Sr. Regulatory Supervisor				
Signature Date						
April 9, 2014 THIS SPACE FOR FEDERAL OR STATE USE						
Ammound hu	THIS SPACE	FUK FEL		AIE USE	I Data	
Approved by			Title		Date .	
Conditions of approval, if any, are attached			Office			

(Instructions on reverse)

NWOCD

