Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR

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

BUREAU OF LAND MANAGEMENT	1711	è
NDRY NOTICES AND REPORTS ON WELLS.		

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. 1					5. Lease Serial No. BIA 360 6. If Indian, Allottee or Tribe Name Jicarilla Apache			
SUBMIT IN TRIPLICATE – Other instructions on reverse side			7. If Unit or CA/Agreement, Name and/or No. RCUD UCT 8 14					
1.	Other	£	011	()		N/A 8. Well Name		
2. Name of Operator					Chacon Amigos 11			
ELM RIDGE EXPLORATION CO LLC						9. API Well No		
3a. Address 3b. Phone No. (include area code)				?)	30-043-21143			
PO BOX 156 BLOOMFIELD NM 87413 505-632-3476 EXT 2			CT 201		10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: "F" Sec. 1-T22N-R3W SHL: 2086' FNL X 1806' FWL BHL: "J" Sec. 1-T22N-R3W BHL: 1980' FSL X 1979' FEL					Lindrith Gallup Dakota West 11. County or Parish, State Sandoval County, NM			
12. CHECK APPROPRIATE BOX(I	ES) TO INDICATE NATUR	E OF NO	TICE, REPOI	RT, OR OT	THER D	ATA		
TYPE OF SUBMISSION	TYPE OF ACTION	• • • • • • • • • • • • • • • • • • • •						
☐ Notice of Intent X Subsequent Report	Acidize Alter Casing Casing Repair	=	oen ture Treat Construction	Rec	duction (Schamation			
	Change Plans	_	and Abandon	==	nporarily	Abandon	1st Delivery	
Final Abandonment Notice	Convert to Injection	Plug	Back	☐ Wai	ter Dispo	sal		
Attach the Bond under which the work Following completion of the involved ope Testing has been completed. Final Abidetermined that the site is ready for final inspection. The Final Final Control of the Final Control of	rations. If the operation results in modernment Notices shall be filled or cition.)	n a multiple only after a	completion or requirements,	of 8-19-	in a new clamation,	interval, a Form I have been comple	3160-4 shall be filed once ted, and the operator has	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Title Sr. Regulatory Supervisor						sor		
Signature		Date August 20, 2014						
	THIS SPACE	FOR FED	ERAL OR ST	TATE USE				
Approved by			Title			Date ACC	EPTED FOR RECORD	
Conditions of approval, if any, are attached certify that the applicant holds legal or equiwhich would entitle the applicant to conduct	table title to those rights in the sult operations thereon.	bject lease	Office					
Title 18 U.S.C. Section 1001, makes it a c fraudulent statements or representations a	rime for any person knowingly a	and willfull ction.	y to make to an	y departmer	nt or agen	cy of the United	Stafes any false fictingus or	
(Instructions on reverse)				V				