

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.

RECEIVED

JAN 20 2015

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. <input checked="" type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		*REVISED*	
2. Name of Operator ELM RIDGE EXPLORATION CO LLC			
3a. Address PO BOX 156 BLOOMFIELD NM 87413		3b. Phone No. (include area code) 505-632-3476 EXT 201	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: "J" Sec.11-T22N-R3W 1972' FSL X 2055' FEL BHL: "N" Sec 11-T22N-R3W 660' FSL X 1980' FWL			
5. Lease Serial No. BIA 360		6. If Indian, Allottee or Tribe Name Jicarilla Apache	
7. If Unit or CA/Agreement, Name and/or No. N/A		8. Well Name and No. Chacon Amigos 18	
9. API Well No. 30-043-21186		10. Field and Pool, or Exploratory Area Lindrith Gallup Dakota West	
11. County or Parish, State Sandoval County, NM			

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 checked="" type="checkbox"/> Other Spud
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Surface Casing
	<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 recompleate 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 recompleation 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 Exploration Co LLC spud the above referenced well on 12-21-14. On 12-22-14 we drilled a 12 1/4" hole to 576' and ran 11 joints of 8-5/8" 24# J-55 casing to 570'. We then pumped 417 sks of Premium Class G cement. Circulated 25 bbls of good cement to surface. Pressure tested casing to 600 PSI for 30 minutes. Test was good. Tested BOP to 2000 PSI for 10 minutes. ✓

ACCEPTED FOR RECORD
JAN 22 2015
FARMINGTON FIELD OFFICE
BY: _____

14. I hereby certify that the foregoing is true and correct	
Name (Printed/Typed) Amy Archuleta	Title Sr. Regulatory Supervisor
Signature 	Date January 20, 2015

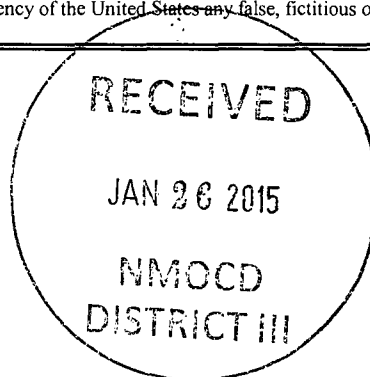
THIS SPACE FOR FEDERAL OR STATE USE

Approved by 	Title	Date
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)

NMOCD



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2. Name of Operator ELM RIDGE EXPLORATION CO LLC		6. If Indian, Allottee or Tribe Name Jicarilla Apache
3a. Address PO BOX 156 BLOOMFIELD NM 87413	3b. Phone No. (include area code) 505-632-3476 EXT 201	7. If Unit or CA/Agreement, Name and/or No. N/A
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<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Alter Casing
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	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Change Plans
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Convert to Injection
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Spud Surface Casing

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 recomple 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 recomple 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.)

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ACCEPTED FOR RECORD

JAN 22 2015
FARMINGTON FIELD OFFICE
BY: [Signature]

14. I hereby certify that the foregoing is true and correct	Title
Name (Printed/Typed) Amy Arculeta	Sr. Regulatory Supervisor
Signature [Signature]	Date December 23, 2014

THIS SPACE FOR FEDERAL OR STATE USE

Approved by	Title	Date
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	

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JAN 26 2015

NMOCD
DISTRICT III

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