Form 3160-5 (November 1994)	BI SUNDRY Do not use thi	UNITED STATES PARTMENT OF THE INT JREAU OF LAND MANAGE (NOTICES AND REPORTS s form for proposals to . Use Form 3160-3 (APD)	MENT S ON WEI drill or	LLS reenter an	C () EB 25		0 Es 5. Lease Serial F 078360 SF 078360 S 3 f Indian, Al	ORM APPROV ED MB No. 1004-0135 spires July 31, 1996 No. Ilottee or Tribe Name A/Agreement, Name and/or No.	
SUBMIT IN TRIPLICATE – Other instructions on reverse side									
1. Oil Well Gas Well Other 2. Name of Operator							8. Well Name and No. Lybrook South 9		
ELM RIDGE EXPLORATION CO LLC							9. API Well No.		
3a. Address3bPO BOX 156 BLOOMFIELD NM 8741350				Phone No. (include area code) 05-632-3476 EXT 203			30-039-24754 10. Field and Pool, or Exploratory Area		
4. Location of W 1883' FSL X					Lybrook Gallup 11. County or Parish, State				
"k" - Sec 18-T23N-R6W							Rio Arriba County		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA									
TYPE OF SUBMISSION TYPE OF ACTION									
Notice of Intent Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Fracture Treat Reclamation Well Integrity Casing Repair New Construction Recomplete Other Change Plans Plug and Abandon Temporarily Abandon Temporarily Abandon									
If the proposal Attach the Bond Following comple Testing has been	is to deepen directionall under which the work etion of the involved op	ons (clearly state all pertinent detain y or recomplete horizontally, give s will be performed or provide the 1 erations. If the operation results in andonment Notices shall be filed o oction.)	ubsurface loc 3ond No. on a multiple	ations and mea file with BLM completion or re	sured and tr 1/BIA. Requ ecompletion i	rue ventical uired subseq in a new in	depths of all pe uent reports sha iterval, a Form	ertinent markers and zones. Il be filed within 30 days 3160-4 shall be filed once	
Elm Ridge has returned this well to production as of 2-20-15.									
						MAF Ni	CEIVE 0 9 2015 MOCD TRICT II		
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Amy Archeleta				Title Sr. Regulatory Supervisor					
Signature	Date	February 25, 2015							
		THIS SPACE	FOR FED	ERAL OR ST	ATE USE	· · ·			
Approved by				Title			Date		
certify that the appl which would entitle	icant holds legal or equ the applicant to conduc		oject lease	Office					
	nts or representations a	rime for any person knowingly an s to any matter within its jurisdicti		o make to any	department	or agency	of the United S	tates any false, fictitious or	

(Instructions on reverse)

NNOCD

ACCEPTED FOR RECCAD

FEB 2 5 2015 FARMINGTON FIELD OFFICE

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