Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

Lease Serial No.

SUNDRY I	NOTICES AND REPOR	TS ON WELLS		NMNM 25446			
Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE – Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or N			
	П			9 Woll Name	and No		
Oil Well X Gas Well Other Name of Operator				8. Well Name and No.			
Ilm Ridge Exploration Company, LLC				Betsy Geiger #1 9. API Well No.			
Address	3b. Phone No. (inci	b. Phone No. (include area code)		30-045-26521			
į.		(505) 632-3476 ext. 201		10. Field and Pool, or Exploratory Area			
Location of Well (Footage, Sec.,	, ,			isti Lower Galllup			
			11. County or				
60' FNL X 330' FWL				11. County of Farish, State			
nit Letter "D"- Sec.18-T25N	N-R12W			San Juan C	County, NM		
CHECK APPROPRIATE BOX		TURE OF NOTICE, I	REPORT, OR OT	HER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION			<u>.</u>			
Notice of Intent Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Constructio	Reclamation		Water Shut-O Well Integrity Other		
_	Change Plans	Plug and Abando	on Temporari	ly Abandon			
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disp	oosal			
m Ridge Exploration Comple well back to production of	on 9-26-05.	NO. TO STATE OF THE PARTY OF TH	parrel on this w	rell on 9-23-0	05. We returned	d 185 001 32 1.1 1.1	
		COL PLAN	al Styles			(3)	
I hereby certify that the foregoing Name (Printed/Typed) Amy	7 /	Title	Produc	ction Assista	nt		
Signature	alla	Date	Octo	ber 31, 2005			
	THIS SPACE	FOR FEDERAL OR					
proved by	- 0	Title		Date			
nditions of approval, if any, are attached tify that the applicant holds legal or equ ich would entitle the applicant to conduc	itable title to those rights in the set operations thereon.	ubject lease					
e 18 U.S.C. Section 1001, makes it idulent statements or representation			ake to any departme	nt or agency of the	he Uni ACOMPIE	DATE OF THE	
The state of the s					MOV	0 0 000F	

(Instructions on reverse)

NMOCD

NOV 0 2 2005

- FARKINGTON FIELD OFFICE BY_____