				RECEIVED			
Form 3160-5 (June 1990)	UNIT DEPARTMEN BUREAU OF L		NTERIOR	NOV 3 0 2016 Farmington Field Offic Bureau of Land Manager	Budget E Expire 5. Lease Desig	EM APPROVED Sureau No. 1004-0135 ss: March 31, 1993 nation and Serial No. G-0101-1435	
SUNDRY NOTICES AND REPORTS ON WELLS						6. If Indian, Allottee or Tribe Name	
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.							
Use "APPLICATION FOR PERMIT" for such proposals						Navajo Allotted	
SUBMIT IN TRIPLICATE					7. If Unit or CA, Agreement Designation		
1. Type of Well Oil Gas Well Other					8. Well Name and No.		
2. Name of Operator					Buckskin A No. 1		
Redwolf Production, Inc.					9. API Well No.		
3. Address and Telephone No.					30-045-30951		
P. O. Box 5382, Farmington, NM 87499 (505) 326-4125					10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					Basin Fruitland Coal 11. County or Parish, State		
1070' FNL & 840' FEL Section 13, 126N, R12W						an County, NM	
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA							
TYPE	OF SUBMISSION			PE OF ACTION			
	X Notice of Intent Subsequent Report Final Abandonment Notice				No No WW Co Note: Report result Completion or Record	hange of Plans ew Construction on-Routine Fracturing ater Shut-off onversion to Injection ispose Water ts of multiple completions on appletion Report and Log form.)	
	posed or Completed Operations (Clearly k. If well is directionally drilled, give su The subject well is being	bsurface locations and	d measured and true ve	rtical depths for all markers an	d zones pertinent		
	OIL CONS. DIV					×	
×				DEC 20	2016	- - 	
14. I hereby certij Signed	fy that the foregoing is true and correct	enthal	Title	Vice-President	Date	11/28/2016	
Approved by	or Federal or State office) <u>Lilliam Tambe</u> Capproval, if any:	kon	Tille Petr	deum Engineur	<u>Date</u>	12/15/2016	
	ction 1001, makes it a crime for any per- ulent statements or representations as to			lepartment or agency of the Ui	nited States any fa	lse,	
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