

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018**SUNDRY NOTICES AND REPORTS ON WELLS**  
*Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*5. Lease Serial No.  
JIC111

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.  
JICARILLA H 1029. API Well No.  
30-039-22005 **22006**10. Field and Pool or Exploratory Area  
W. LINDRITH GALLUP DAKOTA

11. County or Parish, State

RIO ARRIBA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator  
D J SIMMONS, INC.Contact: RODNEY L SEALE  
E-Mail: rodseale.djs@gmail.com3a. Address  
PO BOX 1469  
FARMINGTON, NM 874993b. Phone No. (include area code)  
Ph: 505-326-3753

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 6 T24N R4W 1920FNL 1650FWL

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Successor of Operator
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: 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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

Effective May 1, 2018 DJ Simmons, Inc. (DJ) transfers operatorship of this well to Juniper Resources Exploration Company, LLC (Juniper) whose address is 3333 Lee Parkway, Suite 210, Dallas, TX 75219. Juniper bond number file at the BLM is NMB001434 and BIA Nationwide Oil and Gas Bond is PB002021000031.

NMOCD

AUG 27 2018

DISTRICT III

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #431736 verified by the BLM Well Information System  
For D J SIMMONS, INC., sent to the Rio Puerco  
Committed to AFMSS for processing by VIRGINIA BARBER on 08/23/2018 ( )

Name (Printed/Typed) RODNEY L SEALE

Title AGENT

Signature (Electronic Submission)

Date 08/17/2018

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By

Dave Mankiewicz

Title

AFM-minerals

AUG 23 2018

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

FFO

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 page 2)

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***NMOCD  
AV