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Form 3160-5 (June 2015)	OTTILD OTTILD						FORM APPROVED OCT 2 3 2013 OMB No. 1004-0137 OCT 2 3 2013 Expires: January 31, 2018 5. Lease Serial No. SF 078058			
Do not u	se this f	OTICES AND REPO orm for proposals Jse Form 3160-3 (A		6. If Indian, Allottee or Tribe Nameureau of Land Manageme						
S	UBMIT IN	RIPLICATE - Other instr		7. If Unit of CA/Agreement, Name and/or No.						
1. Type of Well				Central Bisti Unit						
✔ Oil Well	Gas W			8. Well Name and No. Central Bisti Unit 43						
2. Name of Operator DJR	Operating,	LLC					9. API Well No. 30-04	5-05428		
3a. Address 1 ROAD 326	3b. Phone No. ((505) 632-347		e area code		10. Field and Pool or Exploratory Area Bisti Lower Gallup					
4. Location of Well (Footage, Sec., T.R.,M., or Survey Description) 660' FNL X 1980' FWL "C" - Sec. 17-T25N-R12W						State NM				
	12. CHE	CK THE APPROPRIATE B	OX(ES) TO IND	ICAT	E NATURE	OF NOTI	CE, REPORT OR OTH	ER DATA		
TYPE OF SUBMISS	SION				TYI	PE OF AC	TION			
✓ Notice of Intent Subsequent Report Final Abandonment	Hydra Hydra New (Deepen Production (Start/Resume) Hydraulic Fracturing Reclamation New Construction Recomplete Plug and Abandon Temporarily Abandon Plug Back Water Disposal				Water Shut-Off Well Integrity Other				
completion of the invol completed. Final Aband is ready for final inspec DJR Operating, LLC production was sent	lved operation donment No ction.) C request po t to the Cer	ons. If the operation results i tices must be filed only after ermission to set a tank at	n a multiple com r all requirements this well site an y via pipeline. D	pletion , inclu d use)JR de	that tank a bes not, at	letion in a nation, have	new interval, a Form 31 e been completed and th of measurement for c feel the pipelines inte	at be filed within 30 days following 60-4 must be filed once testing has been ne operator has detennined that the site bil sales. Previously, this wells oil grity can handle this production.		
		81	OCT 29 STRICT	2018 1 1	I			2 5 2018 MSS		
							111	1000		
14. I hereby certify that the Amy Archuleta	foregoing is	true and correct. Name (Pr	rinted/Typed)	Title	Regulator	у		-		
Signature	-1			Date			10/22/20)18		
		THE SPAC	E FOR FEDE	RA	ORST	ATE OF	ICE USE			
Approved by Conditions of approval, if a certify that the applicant ho	ny, are stac	hed. Approval of this notice	does not warrant		Title T/. Office	E Br	anch Chief	Date 10/25/18		
which would entitle the app					F	FU	0			
Title 18 U.S.C Section 100 any false, fictitious or fraud						ly and will	Ifully to make to any de	partment or agency of the United States		
(Instructions on page	2)		^	M	OCI	A	ccepted Fo	or Record		

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