Form 3160-5 (September 2001)	UNITED STATE DEPARTMENT OF THE				FORM APPROVED OM B No. 1004-0135 Expires: January 31, 2004	
	BUREAU OF LAND MANAGEMENT			5. Lease Serial No.		
	NOTICES AND RE				14-20-603-5034	
	his form for proposals vell. Use Form 3160-3				 If Indian, Allottee or Tribe Name Navajo 	
	PIPLICATE- Other inst	tructions o	n rever	se side.	7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well □ Gas Well □ Other				8. Well Name and No.		
2. Name of Operator Tacitus, LLC				Navajo Tribal "U" 16 9. API Well No.		
3a Address 2100 Cortland Drive, Farming	gton, NM 87401	3b. Phone No. (<i>include area code</i>) 403-400-0459			30-045-21358 10. Field and Pool, or Exploratory Area Tocito Dome	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description						
Sec 16 T26N R18W; NENW 3 36.493580 N Lat, 108.765900					11. County or Parish, State San Juan, NM	
12. CHECK A	PPROPRIATE BOX(ES) TO) INDICATE	NATUR	E OF NOTICE,	REPORT, OR OTHER DATA	
TYPE OF SUBMISSION			TYF	PE OF ACTION		
Notice of Intent	Acidize	Deepen Fracture T	reat	Production (S	Well Integrity	
Subsequent Report	Casing Repair	New Cons		Recomplete	Other Test for Helium	
Final Abandonment Notice	Change Plans	Plug and A	bandon	Water Dispose		
					(~ 72 degrees at 6645' TVD). RU flowlines to ne lateral completion.	
	IMOCD		Ļ	CCEPTED	FOR RECORD	
	111000				2 0 2019	
DE	C 0 4 2018					
DICT	RICT III			FARMINGTO	N FILL D OFFICE	
0121				By:		
14. Thereby certify that the fore	going is true and correct				/	
Name (Printed/Typed) John C. Thomps	son		Title A	gent/Engineer for T	Tacitus, LLC	
Signature Sick	C.Tm		Date		10/25/2018	
	THIS SPACE FOR	FEDERAL	OR S	TATE OFFICI	EUSE	
Approved by			T	itle	Date	
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to	l or equitable title to those rights		nt or	ffice		
Title 18 U.S.C. Section 1001 and Titl States any false, fictitious or fraudu	e 43 U.S.C. Section 1212, make it a lent statements or representations	a crime for any as to any matter	person kn within its	owingly and willfully jurisdiction.	y to make to any department or agency of the Uni	
(Instructions on page 2)						

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