Form 3160-5 (June 2015)

(Instructions on page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

BUREAU OF LAND MANAGEMENT					illuary 31, 2016	
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. JIC492		
				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit or CA/Agreement, Name and/or No.		
1. Type of Well				8. Well Name and No. JICARILLA 492 1		
☑ Oil Well ☐ Gas Well ☐ Other						
Name of Operator Contact: SHAW-MARIE CRUES DJR OPERATING LLC E-Mail: scrues@djrllc.com				9. API Well No. 30-039-23793		
3a. Address 1 ROAD 3263 AZTEC, NM 87410	Phone No. (include area code): 505-632-3476	10. Field and Pool or Exploratory Area PICTURED CLIFFS				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State		
Sec 28 T28N R2W SWSW 900FSL 790FEL 36.605920 N Lat, 107.041770 W Lon				RIO ARRIBA COUNTY, NM		
12. CHECK THE AF	PPROPRIATE BOX(ES) TO	INDICATE NATURE OF	F NOTICE, I	REPORT, OR OTH	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice - Club.	☐ Acidize	☐ Deepen	☑ Production	on (Start/Resume)	☐ Water Shut-Off	
□ Notice of Intent	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation		☐ Well Integrity	
Subsequent Report ■ Subsequent Report ■ ■ Subsequent Report ■	☐ Casing Repair	☐ New Construction	☐ Recomplete		Other	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon		_ o.mer	
- Than Floundonniem Protect	Convert to Injection	☐ Plug Back	☐ Water Disposal			
12 Describe Proposed or Completed On		ion: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration the				
If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for final DJR OPERATING RETURNE	rk will be performed or provide the F operations. If the operation results bandonment Notices must be filed on inal inspection.	Bond No. on file with BLM/BIA. in a multiple completion or recordly after all requirements, including	. Required subs mpletion in a no ing reclamation	sequent reports must be ew interval, a Form 316	filed within 30 days 0-4 must be filed once	
	NMOCD					
MAY 2 n 2333						
DICTRICT						
DISTRICT III						
14. I hereby certify that the foregoing is		166 varified by the RI M Well	Unformation	System		
Electronic Submission #464866 verified by the BLM Well Information System For DJR OPERATING LL¢, sent to the Rio Puerco Committed to AFMSS for processing by MELISSA REEVES-WIENTJES on 05/10/2019 ()						
		Title HSE TECHNICIAN				
Name (Printed Typed) SHAW-MA	ARIE CRUES	Title HSETE	CHNICIAN			
Signature (Electronic S	Submission)	Date 05/10/20	05/10/2019			
	THIS SPACE FOR I	FEDERAL OR STATE (OFFICE US	SE		
Approved By	Title			Date		
Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent to condition the applicant to conditions the applicant the applicant the applicant to conditions the applica	ject lease					
which would entitle the applicant to condu	Office					

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 of the Keicord States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.



