Form 3160- 5 (September 2001)

UNITED STATES

FORM	APP	ROV	ΈD

September 2001)	BUREAU OF LAND MANAGEMENT				OMB No. 1004- 0135	
				Expires: January 31,2004		
SUNDRY NOTICES AND REPORTS ON WELL			ELLS	5. Lease Serial No. NMSF078463A 6. If Indian, Allottee, or Tribe Name		
SUBMIT IN TR	7. If Unit or CA	Agreement Designation				
1. Type of Well Oil Well Gas Well	8. Well Name a	nd No.				
2. Name of Operator		<u> </u>		True Grit Federal 35 #13		
PATINA OIL AND GA	AS CORPORATION			9. API Well No.		
3a. Address	. Address 3b. Phone No. (include area code)				30-045-33512	
5802 US HIGHWAY 64,	FARMINGTON, NM 87401	505-6	32-8056	10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T	., R., M., or Survey Description)			Basin Dakota / Basin Fruitland Coal		
660' FSL - 675' FWL, UL "	М"			11. County or Parish, State		
SEC. 35, T31N, R13W		San Juan County, NM				
12. CHECK APPRO	PRIATE BOX(S) TO INDICA	TE NATURE OF	NOTICE, REPOR	T, OR OTHE	R DATA	
TYPE OF SUBMISSION	YPE OF ACTION					
Notice of Intent	Acidize	Deepen	Production (S	itart/ Resume)	Water Shut-off	
	Altering Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		X Other	
	Change Plans	Plug and abandon	Temporarily A	Abandon	Spud Notice	
Final Abandonment Notice	Convert to Injection	Plug back	Water Dispos	al	•	
If the proposal is to deepen directing Attach the Bond under which the value following completion of the involvence.	Operation (clearly state all pertinent deta onally or recomplete horizontally, give s work will performed or provide the Bond ed operations. If the operation results in Abandonment Notice shall be filed only or final inspection.)	ubsurface locations and I No. on file with the BI a multiple completion o	measured and true vert LM/ BIA. Required sub or recompletion in a new	ical depths or pert sequent reports sh v interval, a Form	inent markers and sands. all be filed within 30 days 3160-4 shall be filed once	
<u>5/27/2006</u> S _I	pudded well @ 23:00	hrs. Drill ra	ز t & 13-1/2" ਜ	in rface nouse hole	e to 3362.	

		See and the
14. I hereby certify that the foregoing is true and correct. Name (Printed/ Typed)		Table of Grand Control
MIRANDA MARTINEZ Tit	le	REGULATORY ANALYST
Signature Maranda Martiney Da	te	5/30/2006
/ THE S SPACE FOR FEDER	RAL OR STA	FE OFFICE USE
Approved by	Title	Date
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	
Title 18 U.S.C. Section 1001 AND Title 43 U.S.C. Section 1212, make it a crime for any States any false, fictitiousor fraudulent statements or representations as to any matter with		y and willfully to make any department of agency of the United and

(Instructions on reverse)

JUN 0 5 2036 FARMINGTON PLLE OFFICE



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