## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

RCVD JAN19'0' FORM APPROVED DIL CONS. DIU OMB NO. 1004-0137 Expires March 31, 2007 5. Lease Serial No.

NMNM0498

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill abandoned well. Use Form 3160-3 (APD) fo	or to re-enter an JAN 12 AM 10:	58
SUBMIT IN TRIPLICATE - Other instructions	BLM	7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well Oil Well X Gas Well Other  2. Name of Operator	210 FARMINGTON NI	8. Well Name and No. SCHUMACHER #1F
3a. Address  2700 Farmington Ave., Bldg. K. Ste 1 Farmington, 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	3b. Phone No. ( <i>include area code</i> ) 505-324-1090	9. API Well No. 30-045-33175 10. Field and Pool, or Exploratory Area BASIN DAKOTA
1970' FNL & 1970' FWL SEC 8"F"-T30N-R12W  12. CHECK APPROPRIATE BOX(ES) TO INI	DICATE NATURE OF NOTICE BED	11. County or Parish, State  SAN JUAN NM
TYPE OF SUBMISSION	BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF ACTION	
Notice of Intent    Acidize	Fracture Treat Reclamatic  New Construction Recomplet  Plug and Abandon Temporari  Plug Back Water Disp	te X Other SET COMP by Abandon bosal
Describe Proposed or Completed Operation (clearly state all pertinent deta If the proposal is to deepen directionally or recomplete horizontally, give Attach the Bond under which the work will be performed or provide the following completion of the involved operations. If the operation results testing has been completed. Final Abandonment Notices shall be filed o determined that the final site is ready for final inspection.)  Due to high line pressure and low wellhead psi, well. The following measures have been taken to 1) Installed insulated sound wall w/hospital graze) Monitor noise for compliance  The compressor is a Caterpillar 3304, CTP 3-stages of the compressor is a Caterpillar 3304, CTP 3-stages.	subsurface locations and measured and true ver Bond No. on file with BLM/BIA. Required s in a multiple completion or recompletion in a inly after all requirements, including reclamation a compressor must be installed to limit sound from the compressionade silencer	ntical depths of all pertinent markers and zones, subsequent reports shall be filed within 30 days new interval, a Form 3160-4 shall be filed once on, have been completed, and the operator has don't the above mentioned

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Title REGULATORY COMPLIANCE TECH Date 1/10/07 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Title Date Approved by l eam EPS 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