Do not use abandoned was aband	NM OGRID # 141852 3b. Phone No. (include a (505) 325-6779	r an osals.	Budget Burea Expires. Nove Lease Serial Nove Lease Serial Nove For 16 If Indian, Alk If Indian, Alk Budget Burea For 16 If Indian, Alk If Unit or CA Budget Burea Responsible Indian, Alk Responsible Indian, Alk	A by the or Tribe Name Agreement, Name and/or No. And No B Ad5 I, or Exploratory Area saverde	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2615' FNL, 660' FEL (H) Sec. 4, T27N, R8W				11. County or Parish, State San Juan, New Mexico	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Deepen Alter Casing Fracture T Casing Repair New Con Change Plans Plug and Convert to Injection Plug Back	Freat R struction R Abandon T	Production (Start/Resume) Reclamation Recomplete Femporarily Abandon Water Disposal	 Water Shut-Off Well Integrity ✓ Other APD extension 	
zones Attach the Bond under which the w 30 days following completion of the invol- shall be filed once testing has been comple and the operator has determined that the si M&G Drilling Company, Inc is we were unable to drill this well	recomplete horizontally, give subsurface locations an ork will be performed or provide the Bond No on file ved operations. If the operation results in a multiple costed Final Abandonment Notices shall be filed only after is ready for final inspection. Thereby requesting a one year extension on the within the year. This well is scheduled to be the final state of the first scheduled to be the first schedul	with BLM/BIA. Requirements or recompletion or recompletion or recompletion all requirements, included a series of the control	red subsequent reports shall be file on in a new interval, A Form 316 luding reclamation, have been con	ed within 0-4	
OCT 1 8 2007 oureau or Land Management Farmington Field Office					
This is the funal approval which express 12/22/07 14. I hereby certify that the foregoing is the and correct					
Name (Printed/Typed) Rhonda DeVilbiss		Title P	roduction Assistant		
Signature Puli-		Date 1	0-17-07		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by Conditions of approval of any, are attached Approvertify that the applicant holds legal or equitable title	to those rights in the subject lease	Office FF	E	Date 10/18/07	
which would entitle the applicant to conduct operation thereon Title 18 U.C.S. Section 1001 and Fitle 43 U.S.C. Section 1212, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction					