

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FORM APPROVED
OMB No 1004-0135
Expires July 31, 1996

SUBMIT IN TRIPLICATE - Other instructions on reverse side

RECEIVED

NOV 21 2007

1. ☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Elm Ridge Exploration Co. LLC

Bureau of Land Management
Farmington Field Office

3a. Address

PO Box 156 Bloomfield, NM 87413

3b. Phone No. (include area code)

(505) 632-3476 ext. 201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2310' FSL X 2310' FWL

F-Sec. 4-T23N-R3W

5. Lease Serial No.

Jicarilla Joint Venture

6. If Indian, Allottee or Tribe Name

Jicarilla Apache Tribe

7. If Unit or CA/Agreement, Name and/or N

RCVD JAN 28 '08
OIL CONS. DIV.
DIST. 2

8. Well Name and No.

Jicarilla Joint Venture KD #4

9. API Well No.

30-039-21457

10. Field and Pool, or Exploratory Area

W. Lindrith Gallup Dakota

11. County or Parish, State

Rio Arriba, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION |
|--------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize <input type="checkbox"/> Deepen <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing <input type="checkbox"/> Fracture Treat <input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity |
| <input checked="" type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair <input type="checkbox"/> New Construction <input type="checkbox"/> Recomplete <input type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans <input checked="" type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon |
| | <input type="checkbox"/> Convert to Injection <input type="checkbox"/> Plug Back <input type="checkbox"/> Water Disposal |

13 Describe Proposed or Completed Operations (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomple horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once Testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Elm Ridge Exploration Company, LLC has cut off the wellhead, installed a dry hole marker, and completed the reclamation of this location on 11-19-07. We request the location to be inspected for final abandonment.

ACCEPTED FOR RECORD

JAN 25 2008

FARMINGTON FIELD OFFICE
BY _____

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed)

Sharla O'Kelly

Title

Production Assistant

Signature

Sharla O'Kelly

Date

November 20, 2007

THIS SPACE FOR FEDERAL OR STATE 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, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on reverse)

NMOCD