Form 3160-5 (JUNE 1990)

as to any matter within its jurisdiction.

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APP	ROVERD
Budget Bureau N	1004-0135

5. Lease Designation and Serial No.

CHARDY NOTICES AND DEPORTS ON WELL O

P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 30-039-26105 10 Feld and Root of Equipment (Filtred Cliffs 11 Carry or Parish. Subset Rio Arriba County, New Mexico 2 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Abandonment Abandonment Abandonment Notice Final Abandonment Notice Final Abandonment Notice Final Abandonment Notice To Bostote Proposed or Completed Operations (Clearly state all performent details, and give performed dates, including estimated date of stating any proposed work. If well is disciously diried, give subsultate locations and measured and true vertical depite for all markets and zones poincent to this zone y' Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. Title Office Manager Date 1/201 Title Office Manager Date 1/201	Use 'APPLICATION FOR PERMIT - for such proposals Usarilla Apache Tribe			1164	
SUBMIT M TRIPLICATE 7, IN Mar or CA, Agreement Despy stops N/A N/A N/A N/A Mallon Oil Company Address and Tergetore To PO. Box 32.56, Carlsbad, NM 88220 (505) 885-4596 PO. Box 32.56, Carlsbad, NM 88220 PO. B	SUBMIT IN TRIPLICATE				
Note of Corests Note Corests Note of Corests	Type of Well Charge of Departs Subsequent Report Proceed of Compress o		Use "APPLICATION FOR PERMIT" for	or such proposals.	Jicarilla Apache Tribe
Note of Corests Note Corests Note of Corests	Type of Well Charge of Departs Subsequent Report Proceed of Compress o		SURMIT IN TRIDUCATE		7 If Host or CA Agreement Designation
Name of Opcombre Name of Opc	Name of Opportune Name	Type of Well	SUBMIT IN TRIFLICATE		-
Mallon Oil Company Mallon Oil Company Accretion of delignous No. P.O. Box 3256, Carlisbad, NM 88220 (505) 885-4596 9. West Marine and No. 30-039-26105 10 feet and Price of Substance of West Price of Substance o	Mallon Oil Company Acre sept and Telephone No P.O. Box 3256, Carlisbad, NM 88220 (505) 885-4596 9. Wet Name and No. Sept April 10, 20, 20, 30, 1 30-039-26105 10 Feat and more of Sept April 10, 30, 30, 30, 30, 30, 30, 30, 30, 30, 3	Oil W	/ell X Gas Well Other:		N/A
Mallon Oil Company Adhes and Telephone No P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 10-03-03-26105 10-16-16-16-16-16-16-16-16-16-16-16-16-16-	Mallon Oil Company Adhes and Telephone No P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 10. Great Septiment of the sept				
P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 30-039-28105 10 Field and Pool, or Englanders, Area E. Blanco, Pictured Cliffs 11 Cardson I Well Floodage, Sec. 1, R. M. or Survey Descriptions 15/2/ FNL, and 1792/ FEL (NE NW) Unit B Sec. 33, T29N-R02W CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Report Plugging Bock Non-Routine Fracturing Water Shul-Off Altering Casing Conversion to Injection Subsequent Report Plugging Bock Non-Routine Fracturing Conversion to Injection Conversion to Injection Conversion to Injection Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 76 Office Manager Title Cliffice Manager Date 1/5/ Patricia M. Hester Title Lands and Mineral Resoutines Something Resoutines One Water Shul-Off Cardson Resources One Water Shul-	Advances and Telephone No P.O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 9. We apin in 30-039-28105 10 Field and Post, or Explanatory Area E. Blanco, Pictured Cliffs 11 Courts or Paysus, State Rio Arriba County, New Mexico CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Recomplish Plugging Box Non-Routine Fracturing Water Shul-Off Altering Casing Repair Water Shul-Off Altering Casing Hope Water Subsequent Report Plugging Box Non-Routine Fracturing Casing Repair Water Shul-Off Altering Casing Conversion to higherton In Conversion to higherton The Describe Proposed or Completed Operations (Clearly State all performs debats, and give performs debats, indigine performs to the social state in any proposed work. If with is directiously dried give Mallon Oil Company request a one (1) year extension of the approved APD on the above reforenced well. 14. Thereby conductions and measured and two votical digins for all markers and sones persons to the social state in any proposed work. If with is directiously dried give Mallon Oil Company request a one (1) year extension of the approved APD on the above reforenced well. 15. Patricia M. Hester Title Office Manager Date 11201	Name of Operator	Mallon Oil Company		
P. O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 30-039-28105 10 Fells and Paul or Expressive Avea Expressive State 11. County or Pauls. State 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION Notice of intent Notice of in	P. O. Box 3256, Carlsbad, NM 88220 (505) 885-4596 10 Fedia and Poto, for Epistodry, Anna E. Blanco, Pictured Cliffs 11. Guarty or Parish. State 12. Guarty or Guar	Address and Telephone N			
Approved B 10. First and Post or Egopatery Area 10. First and Post or Egopatery Area E. Blanco, Pictured Cliffs E. Blanco, Pictured Cliffs 11. Comity or Paris, Suite Rio Arriba County, New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF ACTION Notice of Intent Abandonment Abandonment Abandonment Recompletion New Construction Now Construction Now Construction Now Construction Now Construction Dispose Water Title Office Manager Date 1/201 Altered of Picture APP Extension Dispose Water Title Office Manager Date 1/201 Approved B Title Office Manager Date Date 1/201 Lands and Mineral Resoultes Date Date Date Date Date Date Date Date	Approved B 10. Feed and Pack of Epistation yares E. Blanco, Pictured Cliffs E. Blanco, Pictured Cliffs 11. County or Pasint, State Rio Arriba County, New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF ACTION TYPE OF ACTION Notice of Intent			(505) 885-4596	
Title United Manager Date Da	Title Office Manager Title Canny or Paran, Side Ric Arriba County, New Mexico CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent			,	
Rec. 33, T29N-R02W CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion New Construction Ne	Rec. 33, T29N-R02W CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent				E. Blanco, Pictured Cliffs
TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION Abandonment Abandon	TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION Abandonment Abandonment Abandonment Abandonment Abandonment Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Altering Casing Conversion to Injection Solder: APD Extension Dispose Water (Non-Routine Fracturing) Conversion to Injection Will Describe Proposed or Compresed Operations (Clearly state all performs delates, and give performs delate, including estimated date of starting any proposed worth. If will is directionally direct gives subsurface focations and measured and tries vertical depths for all markers and zones perinent to this zone; Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. Title Office Manager Date 1/2/01 Date 1/2/01 Date Date		-		11. County or Parish, State
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion New Construction Casing Repair Water Shul-Off Water Shul-Off Casing Repair Water Shul-Off Water Shul-Off Other: APD Extension Dispose Water New Repair and to Injection Dispose Water New Repair and to Injection Dispose Water New Repair and to Injection New Repair and Injection New Construction New Repair and Injection New Construction New	TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion New Construction New Construction New Construction New Construction New Construction New Construction Plugging Back Non-Routine Fracturing Casing Repair Water Shut-Off Wat	Sec. 33, T29N-R02	2W		Rio Arriba County, New Mexico
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent	TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Change of Plans Recompletion New Construction Plugging Back Non-Routine Fracturing Water Shut-Off Water Shut-Off				
Notice of Intent	Notice of Intent	2	CHECK APPROPRIATE BOX(S) TO IND	ICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
Recompletion New Construction New Construction Non-Routine Fracturing Casing Repair Water Shut-Off Altering Casing Conversion to Injection Dispose Water Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is described in their waters and acrees perinnent to this zone of the approved APD on the above referenced well. Title Office Manager Date 1/2/01 Signar Date 1/2	Recompletion New Construction New Construction New Construction New Construction Non-Routine Fracturing Plugging Back Non-Routine Fracturing Water Shut-Off Altering Casing Repair Water Shut-Off Altering Casing Conversion to Injection Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Repairs on twelf Completes on Recompleted Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally direct, give Substitute Dispose Water Non-Routine Practuring Non-Routine Fracturing Non-Routine Fracturi		TYPE OF SUBMISSION	TYPE	OF ACTION
Recompletion New Construction New Construction Non-Routine Fracturing Casing Repair Water Shut-Off Altering Casing Conversion to Injection Dispose Water Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is described in their waters and acrees perinnent to this zone of the approved APD on the above referenced well. Title Office Manager Date 1/2/01 Signar Date 1/2	Recompletion New Construction New Construction New Construction New Construction Non-Routine Fracturing Plugging Back Non-Routine Fracturing Water Shut-Off Altering Casing Repair Water Shut-Off Altering Casing Conversion to Injection Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Fracturing Other: APD Extension Dispose Water Non-Routine Repairs on twelf Completes on Recompleted Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally direct, give Substitute Dispose Water Non-Routine Practuring Non-Routine Fracturing Non-Routine Fracturi				
Plugging Back Non-Routine Fracturing Casing Repair Water Shuf-Off Casing Repair Water Shuf-Off Casing Repair Water Shuf-Off Conversion to Injection Dispose Water (New Reportment of Injection Dispose Water Complete of Proposed or Complete or Proposed or Complete of Proposed or Complete or Pro	Subsequent Report Plugging Back Non-Routine Fracturing		Notice of Intent	Abandonment	Change of Plans
Casing Repair Water Shull-Off	Casing Repair Water Shul-Off			Recompletion	New Construction
Final Abandonment Notice Altering Casing Conversion to Injection Dispose Water Dispo	Final Abandonment Notice Altering Casing Conversion to Injection X Other: APD Extension Dispose Water (Note Report reads of multiple compliants on Net Completed Operations (Cleanly state all perfinent details, and give perfinent dates, including estimated date of starting any proposed work. If well is directionally diffied, give subsurface locations and measured and true vertical depths for all markers and zones perment to this zone ! Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certified titule foregoing is true and correct Signed Say Davis Title Office Manager Date 1/2/01 //s/ Patricia M. Hester Title Lands and Mineral Resources Date D		X Subsequent Report	Plugging Back	Non-Routine Fracturing
X Other: APD Extension Dispose Water (Note: Report reaction of multiple compliance on Year)	X Other: APD Extension Dispose Water (fries Report stands of multiple completes on Well Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone Y Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certified tiple foregoing is true and correct Signed Gay Davis Title Office Manager Date 1/2/01 //s/ Patricia M. Hester Title Lands and Mineral Resources Date			Casing Repair	Water Shut-Off
X Other: APD Extension Dispose Water (rote Report static of multiple compliants on Well Competency of Recompliants (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical deptits for all markers and zones personnent to this zone?) Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certified if the foregoing is true and correct Yes Diffice Manager Date 1/2/01	X Other: APD Extension Dispose Water (100 the Report results of multiple complians on Well Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical deptits for all markers and zones personent to this zone?) Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certified if the foregoing is true and correct Yes Date 1/2/01		Final Abandonment Notice	Altering Casing	Conversion to Injection
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone.) Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certify the foregoing is true and correct. Signed Gay Davis Title Office Manager Date 1/201 Approved B Title Lands and Mineral Resources Date Date 2 2000	Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone? Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. Interety certify the foregoing is true and correct				
Completed Operations (Clearly state all perfinent details, and give perfinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perforent to this zone.)* Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certify dat the foregoing is true and correct Signed Gay Davis Title Office Manager Date 1/2/01 Approved B /s/ Patricia M. Hester Title Lands and Mineral Resources Date Date 2 2000	Completed Operations (Clearly state all perfinent details, and give perfinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones perfinent to this zone.)* Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. Thereby certify dat the foregoing is true and correct Signed Gay Davis Title Office Manager Date 1/2/01 Approved B /s/ Patricia M. Hester Title Lands and Mineral Resources Date Date Date Date Date Date Date Date		l e e e e e e e e e e e e e e e e e e e	LATOther APD Extension	
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone? Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. Thereby certify dat the foregoing is true and correct Signed Gay Davis Title Office Manager Date 1/2/01 Approved B Title Lands and Mineral Resources Date Date 2 2 2000	Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone! Mallon Oil Company request a one (1) year extension of the approved APD on the above referenced well. 14. I hereby certify that the foregoing is true and correct Signed Gay Davis Title Office Manager Date 1/2/01 Approved B Title Lands and Mineral Resources Date MAN 2 2 2000			A Other: APD Extension	•
14. I hereby certify that the foregoing is true and correct Signed Gay Davis (THIS SPACE FOR FEDERAL OR STATE OFFICE USE) Approved B	14. I hereby certify that the foregoing is true and correct Signed Gay Davis (THIS SPACE FOR FEDERAL OR STATE OFFICE USE) Approved B			s, including estimated date of starting any proposed work	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form)
Signed Gay Davis (THIS SPACE FOR FEDERAL OR STATE OFFICE USE) Approved B	Signed Gay Davis (THIS SPACE FOR FEDERAL OR STATE OFFICE USE) Approved B	subsurface	n Oil Company request a one (1) year exten	s, including estimated date of starting any proposed work	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form) k. If well is directionally drilled, give
		subsurface	n Oil Company request a one (1) year exten	s, including estimated date of starting any proposed work	(Note Report results of multiple completion on Well Completion or Recompletion Report and Log form) k. If well is directionally drilled, give
		Mallor refere 14. Thereby certify det tyle Signed Gay Do	n Oil Company request a one (1) year extenenced well.	s, including estimated date of starting any proposed workness to this zone)* sion of the approved APD on	(Note Report results of multiple completion on Well Completion or Recompletion Report and Log form) k. If well is directionally drilled, give the above
		Mallor refere 14. Thereby certify that the Signed Gay Da (THIS SPACE FOR FEDERAL OR: Approved B	n Oil Company request a one (1) year extenenced well. Toregoing is true and correct avis STATE OFFICE USE) /S/ Patricia M. Hester	s, including estimated date of starting any proposed workness to this zone)* sion of the approved APD on	(Note Report results of multiple completion on Well Completion or Recompletion Report and Log form) k. If well is directionally drilled, give the above Date 1/2/01