Form 3160-5
(JUNE 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

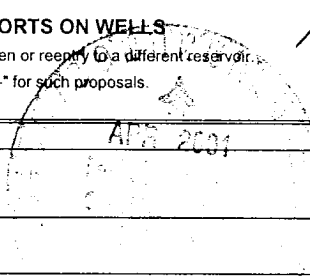### SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to deepen or reenter to a different reservoir.
Use "APPLICATION FOR PERMIT --" for such proposals.

SUBMIT IN TRIPLICATE

5. Lease Designation and Serial No	MDA 701-98-0013
6. If Indian, Allotte or Tribe Name	Jicarilla Apache Tribe
7. If Unit or CA, Agreement Designation	N/A

1 Type of Well

Oil Well [ ]   Gas Well [X]   Other:

2 Name of Operator

Mallon Oil Company

3 Address and Telephone No

P. O. Box 2797 Durango, CO 81302   (970) 382-9100

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

1600' FSL and 1200' FWL (NW/SW) Unit L
Sec 6, T29N-R02W

8. Well Name and No	Jicarilla 29-02-06 No. 1
9. Well API No	30-039-26394
10. Field and Pool, or Exploratory Area	East Blanco; Pictured Cliffs
11. County or Parish, State	Rio Arriba County, New Mexico

12   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
[X] Subsequent Report	[ ] Plugging Back	[ ] Non-Routine Fracturing
	[ ] Casing Repair	[ ] Water Shut-Off
[ ] Final Abandonment Notice	[ ] Altering Casing	[ ] Conversion to Injection
	[X] Other: Pressure Test	[ ] Dispose Water
	Production Csg	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13 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 pressure tested the production casing on March 14, 2001 on the above referenced well to 2000 psi, held ok.

14 I hereby certify that the foregoing is true and correct

Signed _____Gay Davis_____   Title) Office Manager   Date ___3/29/01___

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

Approved By ___/s/ Brian W. Davis___   Title _Lands and Mineral Resources_   Date __APR 6 2001__

Conditions of approval, if any:

*See Instruction on Reverse Side

CONFIDENTIAL