Form 3160-5

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

FORM APPROVED

Budget Bureau No 1004-0135

S Lease Designation and Sonal No NMM-18319  Do not use this form for proposales to drill or to deepen or reentry to a different reservoir Use "APPLICATION FOR PERMIT " for such proposale "	SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or rearrity to a different reservoir  Use "APPLICATION FOR PERMIT " for such proposals  SUBMIT IN TRIPLICATE  1. Type of Wel  O ther  2. Name of Operation Synfergy Operating, LLC  3. Address and Telephone No PO Box 5513 Farmington, NM 87499  4. Location of Well Footage, Sep. T. R. M. of Survey Decorption)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  Abandonnent Subsequent Report  Program Back Casing Repeir Abandonnent Necocome of Completed Operations (Casiny state all pertinent deales, and give portinent dister, including, estimated date of studing work.)  13. Describe Proposed or Completed Operations (Casiny state all pertinent deales, and give portinent dister, including, estimated date of studing work.)  14. Thereby certify that they foregoing of your state all pertinent deales, and give portinent dister, including, estimated date of studing work.  If well is directionally diffied give substitutes locations and measured and thus wintool depths for all markets of relate on the work.  Signed Thomas E, Mullios This space for federal or later office use Approved by Conditions of adaptions of the state office use Approved by Conditions of agents with the property of the United States of property is an addition of the work.  Title: Engineering Manager  Date  3. 19 - 2.4.  Date  Da	SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or retently to a different reservoir Use "APPLICATION FOR PERMIT "- for such proposals "  SUBMIT IN TRIPLICATE"  1. Type of Well	1990) BUREAU OF LA	ND MANAGEMENT	Expires March 31, 1993
Do not use this form for proposals to drill or to deepen or recently to a different reservoir Use "APPLICATION FOR PERMIT." for such proposals  1. Type of Well    SUBMIT IN TRIPLICATE	Do not use this form for proposable to drill or to deepen or reentry to a different reservoir Use "APPLICATION FOR PERMIT." for such proposable  1. Type of Well 2. Name of Coperator 2. Name of Coperator 3. Well Name and No. 2. Name of Coperator 3. Address and Teichprine No. PO Box 5513 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 4. Location of Well (Foodage, Sec. T. R. M. or Survey Description) 5. Type OF SUBMISSION 5. Type OF SUBMISSION 5. Type OF SUBMISSION 5. Playing Back 7. Playing Back 9. Abandoment 8. Subsequent Report 6. Playing Back 9. Casing Repair 9. Altering Gasing 9. Control of Plane 1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including work.  1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including work.  1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including work.  1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including work.  1. Type OF SUBMISSION 1. Type OF SUBMISSION 1. Type OF SUBMISSION 1. Type OF SUBMISSION 1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including work in work.  1. Describe Proposed or Completed Operations (Charly state all portioned details, and give pertinent details, including including including work.  1. Linear Submission Submission Submission Submission Submission Submission Submission Sub	Do not use this form for proposable to different reservoir Use "APPLICATION FOR PERMIT." for such proposable    SUBMIT IN TRIFLICATE			<ol><li>Lease Designation and Serial No.</li></ol>
Use "APPLICATION FOR PERMIT -" for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  OWNEL  Sas Wes Other  Concoc 29.4 # 7  3. Advises and Teaphone No. PO Box 5513  Farmington, NM 87499  4. Location of Well ("rockeys, Sec, T.R., M. or Survey Description)  Unit E, 1485 FNL 8, 793 FWL, Sec 20, T29N, RO4W  11. Country or Parks, State Ric Arriba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Notice of Infent Subsequent Report Final Abandonment Notice  Abandonment Notice  Abandonment Notice  13. Describe Proposed or Completed Operations (Clearly state all pertinent dates, and give pertinent dates, including, self-indication of this work.  14. Thereby certify that the foregoing if sup and exfect Signed Thomas E, Mullins This speak for foreits or edited filled use Approved by Title:  Indicate Approved by Title:  Date	Use "APPLICATION FOR PERMIT -" for such proposals    SUBMIT IN TRIFLICATE   7. If Unit or CA. Agreement Designation	Use "APPLICATION FOR PERMIT." for such proposals    SUBMIT IN TRIFLICATE	SUNDRY NOTICES AI	ND REPORTS ON WELLS	
Use "APPLICATION FOR PERMIT " for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  Os Well  Os Well  Os Well  Gas Well  Other  2. Name of Operation Synergy Operating, LLC  3. Address and Telephone No PO Box 5513 Farmington, NM 87499  4. Location of Well Foodage, Sec., T.R. M. or Survey Description) Unit E, 1485* FNL & 793* FWL, Sec 20, T29N, RO4W  10. Field and Pool, or Exploratory New Mexico  11. Covery or Prints, State Ric Arriba Countly New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Notice of Intent Subsequent Report Final Abandonment Notice Abandonment Notice Abandonment Notice Abandonment Notice Abandonment Notice Abandonment Notice Tivel is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally diffed give subsurface locations and measured and true writed depths for all markets and zones of performent to this work.  It well is directionally different to the work and the performent different to the work and the performance of the performent different to	Use "APPLICATION FOR PERMIT." for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  Oil Well  Oil Well  Os Swell  Other  2. Name of Operator Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513  Farmington, NM 87499  10. Fletd and Poto of Explorator)  Unit E, 1485* FNL & 793* FWL, Sec 20, T29N, RO4W  Oil Well Foodage, Sec, T. R. M., or Survey Description)  Unit E, 1485* FNL & 793* FWL, Sec 20, T29N, RO4W  Type OF SUBMISSION  Type OF SUBMISSION  Type OF SUBMISSION  Type OF SUBMISSION  Type OF ACTION  Abandoment  Abandoment  Recompletion  Notice of Intent  Subsequent Report  Casing Repair Alering Gasing Other  Alering Gasing Other  Tower of Submission (Casing state all perfisient didals, and give perfinent dates, including, admissed and of efforts in the Vertical depths for all markers and zones of perfinent to this work.  The directionally dilled give subsurface locations and measured and tine vertical depths for all markers and zones of perfinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and office.  This spece for feeders of state office use.  Thomas E, Mullins  This spece for feeders of state office use.  Thomas E, Mullins  Tribe Engineering Manager  Date 3 - 19 - 200  Date:	Use "APPLICATION FOR PERINIT." for such proposals  SUBMIT IN TRIPLICATE  1. Type of Well  Oit Well  Oit Well  Ose Well  Other  2. Name of Operator  Synergy Operating, LLC  3. Address and Telephone No PO Box 5513  Farmington, NM 87499  4. Location of Well (Fodage, Ser. F. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. County or Parksh, State Rio Amba County New Mexico  12. OHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  13. OHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  14. Indicating the subsurface locations and measured and frue vertical depths for all markets and cores of pertinent to this work.  15. Describe Proposed or Completed Operations (Clearly state all pertinent defeating, and give pertinent defects, including, estimated door of submission of the subsurface locations and measured and frue vertical depths for all markets and zones of pertinent to this work.  16. Engineering Manager  Date:  Tifle:  Date:  Dat	Do not use this form for proposals to drill	or to deepen or reentry to a different reservoir	NMNM-18319
1. Type of Well  Of Well  Gas Well  Other  2. Name of Operator Synergy Operating, LLC  3. Address and Tolephone No. PO Box 5513 Farmington, NM 87499 4. Location Vell (Footage, See, T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  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  Abandoment Recompileton Notice of Intert  Subsequent Report  Final Abandoment Notice  13. Describe Proposed or Correlated Operations (Clearly state all portisent details, and pive pertined dates, Including, and the County of Parish (State Report Interest	1. Type of Well See Well Other  2. Name of Operator Synergy Operating, LLC  3. Address and Telephone No PO Box 5513 Farmington, NM 87499  4. Location of Well Foodage, Sec. T. R. M. or Survey Description) Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, RO4W  1. Common of Well Foodage, Sec. T. R. M. or Survey Description) Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, RO4W  1. Common of Pictured Cliffs  1. County or President State Rio Arriba County Notice of Intert Subsequent Report Rio Arriba County Plogging Back Casing Repair Abarrad Gasing Other Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated and of starting work.  1. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated and of starting work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. There is a functional for state office use Approved for foodard or state office use Approved by	1. Type of Well			6. If Indian, Allottee or Tribe Name
1. Type of Well  Of Well  Gas Well  Other  2. Name of Operator Synergy Operating, LLC  3. Address and Tolephone No. PO Box 5513 Farmington, NM 87499 4. Location Vell (Footage, See, T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  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  Abandoment Recompileton Notice of Intert  Subsequent Report  Final Abandoment Notice  13. Describe Proposed or Correlated Operations (Clearly state all portisent details, and pive pertined dates, Including, and the County of Parish (State Report Interest	1. Type of Well See Well Other  2. Name of Operator Synergy Operating, LLC  3. Address and Telephone No PO Box 5513 Farmington, NM 87499  4. Location of Well Foodage, Sec. T. R. M. or Survey Description) Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, RO4W  1. Common of Well Foodage, Sec. T. R. M. or Survey Description) Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, RO4W  1. Common of Pictured Cliffs  1. County or President State Rio Arriba County Notice of Intert Subsequent Report Rio Arriba County Plogging Back Casing Repair Abarrad Gasing Other Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated and of starting work.  1. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated and of starting work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. Well is directionally drilled give subsurface locations and measured and true vertical deptits for all markers and zones of pertinent to this work.  1. There is a functional for state office use Approved for foodard or state office use Approved by	1. Type of Well		• •	
1. Type of Well  Col Well  Comparison  2. Name of Operator  Synergy Operating, LLC  3. Address and Telephone No PO Box 5513 Farmington, NM 87499  4. Location of Well Flordage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. County or Pharial, State Rio Arriba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Abandoment  Recomplistion  Notice of Intent  Subsequent Report  Final Abandoment Notice  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertined dates, including, settlement details and fine year of the survey of the submission of the survey of the submission of the survey	Type of Well   Seas Well   Other	1. Type of Well	SUBMIT IN	N TRIPLICATE	
2 Name of Operator Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513 Farmington, NM 87499 4. Location of Well (Fodage, Sec. T. R. M. of Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10. Field and Pool of Exploratory Robert Operatory Robert	2 Name of Operator Synergy Operating, LLC  2 Name of Operator Synergy Operating, LLC  3. Address and Teephone No. PO Box 5513 Farmington, NM 87499  4. Location of West (Foologe, See, T.R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10 Field and Pool or Eutoratory Gobernador Pictured Cliffs 11 Country or Parish, State Rico Arriba Country New Mexico  12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Infent Subsequent Report Pinging Back Final Abandonment Notice Altering Gasing Other Altering Gasing The West is directionally drilled give subsurface locations and measured and true vertical degits for all markers and zones of pertners to this work.  ERROY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing fit susp and opticet Signed Thomas E, Mullins Title: Date: Da	2 Name of Coperator Synergy Operating, LLC  2 Name of Coperator Synergy Operating, LLC  3. Address and Telephone No. PO 80x 5513 Farmington, NM 87499  4. Location of West (Poctage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10. Field and Pool or Exponatory Gobernador Pictured Cliffs 11. County or Parish, State Rich Arriba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent Subsequent Report Final Abandonment Notice Abandonment Recompletion Plugging Back Casing Repair Abandonment Notice Casing Repair Abandonment Recompletion Plugging Back Casing Repair Abandonment Notice Casing Repair Abandonment Notice Title Report Convention Indicate on the United States any Indicate Completion work It well a directionally directly give subsurface to bestitions and minesured and thus vertical depths for all markers and concer of pertners to this work.  ERROY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing if true and directly completion or Well-Considered Construction Thomas E. Mulline These packed before one office use Approved by Title: Date:			7. If Unit or CA, Agreement Designation
2. Name of Operator Synergy Operating, LLC  2. Name of Operator Synergy Operating, LLC  3. Address and Telephore No PO Box 5513 Farmington, NM 87499 4. Location of Well (Foctage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Pool or Exploratory Robert State Rich Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION  Notice of Internt Subsequent Report Final Abandonment Notice Final Abandonment Notice  13. Describe Proposed or Completed Operations (Clearly state all portioned decide, and give pertinent dates, including, estimated date of starting water Shub-Off (If well is directionally diffied give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WIELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing it jug and coffect Signed Thomas E, Mullins This space for federal or state office use Approved by: Title: Date:	2 Name of Operator Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513 Farmington, NM 87499 4. Location of Well Footage, Sec. T. R., M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10. Field and Pool or Exploratory Robert Operatory Rober	2 Name of Operator Synergy Operating, LLC  2 Name of Operator Synergy Operating, LLC  3 Address and Telephone No PO Box 5513 Farmington, NM 87499  4 Location of Well (Footage, Sec. T. R. M. of Survey Description)  Unik E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10 Field and Pool of Exploratory  Gobernador Pictured Cliffs  11: Country or Parish, State Rich Arriba Country 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 Subsequent Report  Recompletion Plugging Back Casing Repair Abandoment Notice  Abandoment Notice Casing Repair Casing Repair Abandoment Notice of Intent Subsequent Report Dispose Water Subscription Dispose Water Subscription Dispose Water Subscription Dispose Vater Subscription Dispose Vat			
2. Name of Operator Synergy Operating, LLC  2. Name of Operator Synergy Operating, LLC  3. Address and Telephore No PO Box 5513 Farmington, NM 87499 4. Location of Well (Foctage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Pool or Exploratory Robert State Rich Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION  Notice of Internt Subsequent Report Final Abandonment Notice Final Abandonment Notice  13. Describe Proposed or Completed Operations (Clearly state all portioned decide, and give pertinent dates, including, estimated date of starting water Shub-Off (If well is directionally diffied give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WIELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing it jug and coffect Signed Thomas E, Mullins This space for federal or state office use Approved by: Title: Date:	2 Name of Operator Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513 Farmington, NM 87499 4. Location of Well Footage, Sec. T. R., M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10. Field and Pool or Exploratory Robert Operatory Rober	2 Name of Operator Synergy Operating, LLC  2 Name of Operator Synergy Operating, LLC  3 Address and Telephone No PO Box 5513 Farmington, NM 87499  4 Location of Well (Footage, Sec. T. R. M. of Survey Description)  Unik E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  10 Field and Pool of Exploratory  Gobernador Pictured Cliffs  11: Country or Parish, State Rich Arriba Country 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 Subsequent Report  Recompletion Plugging Back Casing Repair Abandoment Notice  Abandoment Notice Casing Repair Casing Repair Abandoment Notice of Intent Subsequent Report Dispose Water Subscription Dispose Water Subscription Dispose Water Subscription Dispose Vater Subscription Dispose Vat	☐ Oil Well 🔀 Gas Well	Other	
Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513 (505) 325-5449  Farmington, NM 87499  4. Location of Well (Footage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  Notice of Intent  Subsequent Report  Final Abandoment Notice  Final Abandoment Notice  Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of stating work. If well is derectionally drilled give subsurface locations and measured and true vertical depths for all markers and zone operations to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing is gruy and offect.  Signed:  Thomas E, Mullins  This space for federal or state office usc  Approved by:  Title:  Engineering Manager  Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Title:  Engineering Manager  Date:  Dispose Water  Final Date:  Final Date:  Dispose Water  Final Date:  Final	Synergy Operating, LLC  3. Address and Telephone No. PO Box \$513 Farmington, NM 87499  4. Location of Well (Footage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. Country or Parks, State Rio Ambia Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Notice of Intent Subsequent Report Final Abandonment Notice  Abandonment Recompletion Plugging Back Casing Repair Abandonment Notice Altering Gasing Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of standard work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing-life joury and officed.  Signed: Thomas E, Mullins This space for federal or state office use Approved by: Conditions of approval if any  Title: Date: Date	Synergy Operating, LLC  3. Address and Teephone No. PO Box 5513 Farmington, NM 87499  4. Location of Well Findage, Sec. T. R. M. of Survey Description)  Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Pool of Exploratory  Gobernador Pictured Cliffs  11. County of Parks, State Rich Armine County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION  Other  Notice of Intent  Subsequent Report  Planging Back Casting Repair  Casting Repair  Other  Other Granging Of Purish Non-Rougheston in Well Control on Non-Roughest Individual Parks Indication of Non-Roughest Individual Parks Indication Indication of Non-Roughest Individual Parks Indication Indication Indication Indication  13. Describe Proposed or Completed Operations (Clearly state all portioned details, and give pertinent dates, including, estimated date of starting Water Shul-Off.  14. I hereby certify that the foregoing of Tayle and confect  Signed Thomas E, Mullins  Title: Engineering Manager  Date: 3 - 19 - 20.  Date: Date		<u></u>	8. Well Name and No.
Synergy Operating, LLC  3. Address and Telephone No. PO Box 5513 (505) 325-5449  Farmington, NM 87499  4. Location of Well (Footage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  Notice of Intent  Subsequent Report  Final Abandoment Notice  Final Abandoment Notice  Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of stating work. If well is derectionally drilled give subsurface locations and measured and true vertical depths for all markers and zone operations to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing is gruy and offect.  Signed:  Thomas E, Mullins  This space for federal or state office usc  Approved by:  Title:  Engineering Manager  Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Dispose Water  Final Date:  Title:  Engineering Manager  Date:  Dispose Water  Final Date:  Final Date:  Dispose Water  Final Date:  Final	Synergy Operating, LLC  3. Address and Telephone No. PO Box \$513 Farmington, NM 87499  4. Location of Well (Footage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. Country or Parks, State Rio Ambia Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Notice of Intent Subsequent Report Final Abandonment Notice  Abandonment Recompletion Plugging Back Casing Repair Abandonment Notice Altering Gasing Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of standard work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing-life joury and officed.  Signed: Thomas E, Mullins This space for federal or state office use Approved by: Conditions of approval if any  Title: Date: Date	Synergy Operating, LLC  3. Address and Teephone No. PO Box 5513 Farmington, NM 87499  4. Location of Well Findage, Sec. T. R. M. of Survey Description)  Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Pool of Exploratory  Gobernador Pictured Cliffs  11. County of Parks, State Rich Armine County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION  Other  Notice of Intent  Subsequent Report  Planging Back Casting Repair  Casting Repair  Other  Other Granging Of Purish Non-Rougheston in Well Control on Non-Roughest Individual Parks Indication of Non-Roughest Individual Parks Indication Indication of Non-Roughest Individual Parks Indication Indication Indication Indication  13. Describe Proposed or Completed Operations (Clearly state all portioned details, and give pertinent dates, including, estimated date of starting Water Shul-Off.  14. I hereby certify that the foregoing of Tayle and confect  Signed Thomas E, Mullins  Title: Engineering Manager  Date: 3 - 19 - 20.  Date: Date	2 Name of Operator		
3. Address and Telephone No PO Box 5513 Farmington, NM 87499 4. Location of twill Flootage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Pool of Exploratory  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. Courty 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 SUBMISSION Abandoment Subsequent Report Final Abandomment Notice Abandoment Abandoment Recompletion Plugging Back Charge of Plars Non-Routine Fracturing Attening Casing Other Other frequency of Plars Non-Routine Fracturing Other frequency of Plars Non-Routine Fracturing Other frequency of Plars Non-Routine Fracturing Non-Routine Fracturing Non-Routine Fracturing Other frequency of Plars Non-Routine Fracturing Non-Routine Fracturing Other frequency of Plars Non-Routine Fracturing Other frac	3. Address and Telephone No PO Box 5513 Farmington, NM 87499 4. Location of Well (Footage, Sec, T. R. M. or Survey Description) Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, R04W  11. Country or Parish, State Rio Arriba Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent   Abandoment   Abandoment   Abandoment   Recompletion   Non-Routine Fracturing     Subsequent Report   Prinal Abandonment Notice   Altering Casing   Other     Other   Other Country   Other Country	3. Address and Telephone No PO Box 5513 Farmington, NM 87499 4. Location of twill Flootage, Sec. T. R. M. or Survey Description) Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  10. Field and Phot or Exploratory  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. Courty 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 Subsequent Report Final Abandonment Notice  Abandoment Recompletion Plugging Back Carriage asing Other Other Frequency of Parish Non-Routine Frequency Other Gradient or Make or Indigent County Heel is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of deating work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing of true and office use Approved by:  Title:  Engineering Manager  Date: 3 - 14 - 2.00  Date:  Date:  Date:  15. Section 1001: make it come to any person invowingly and witfully to make to any department or agency of the United States any false, ficcious, or finustuary statements.	•		Conoco 29-4 # 7
PO Box 5513 (505) 325-5449    Farmington, NM 87499	PO Box 5513 (505) 325-5449  Farmington, NM 37499  4. Location of Well (Fodage, Sec, T. R., M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  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 SUBMISSION  TYPE OF ACTION  Abandoment Recompletion Plugging Back Plugging Back Altering Gasing Other Plugging Back Altering Gasing Other Recompletion Non-Routher Frocturing Water Shut-Off Correction Indicationally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and optical Thomas E. Mullins  This space for federal or state office use  Approved by: Conditions of approval if any  Title: Date: Da	PO Box 5513 (505) 325-5449  Farmington, NM 87499  4. Location of Well (Footage, Sec, T. R., M, or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. Country or Parks, State Rio Arriba Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  Notice of Infent Subsequent Report Plagging Bock Plagging Bock Other Conversion to Injection Dispose Water (Now Report and a midgle competence was Plagging Bock Other Other Conversion to Injection Dispose Water (Now Report and a midgle competence was Conversion to Injection Dispose Water (Now Report and a midgle competence was Conversion to Injection Dispose Water (Now Report and a midgle competence was Conversion to Injection Dispose Water (Now Report and a midgle competence was Conversion to Injection Dispose Water (Now Report and a midgle competence was Competence or subspect red to by from)  13. Describe Proposed or Completed Operations (Clearly state all perform details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical deptris for all markers and convers of pertinent to this work.  ERROY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and optical Signed Thomas E. Mullins  This space for federal or state office use Approved by Thomas E. Mullins  This appear of referral or state office use Approved by a matter within its unicidion.  Plagging Bock  Title: Engineering Manager  Date: 3 - 1/1 - 2.0.  Date: 3 - 1/1 - 2.0.  Date: 3 - 1/1 - 2.0.  Date: 4 - 2.0.  Date: 5 - 2.0.  Date: 4 - 2.0.  Da	Cyriolgy Operating, 220		9. API Well No.
PO Box 5513 (505) 325-5449    Farmington, NM 87499	PO Box 5513 (505) 325-5449  Farmington, NM 37499  4. Location of Well (Footage, Sec, T. R., M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERROY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is thus and operation in the component of	PO Box 5513 (505) 325-5449  Farmington, NM 87499  4. Location of Well (Footage, Sec, T. R., M, or Survey Description)  Unit E, 1485' FNL 8. 793' FWL, Sec 20, T29N, R04W  11. Country or Pariah, State Rico Amba Country  New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF SUBMISSION  Abandoment  Recompletion  Plagging Back Other  Casing Repair Altering Casing Other  Other  Other Converient to Injection Dispose Water Shut-Off Converient to Injection Dispose Water Shut-Off (Inc. Report Box Shut-Off Converient to Injection Dispose Water Shut-Off (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Report Box Shut-Off Converient to Injection Dispose Water (Inc. Box Shut-Off Converient To Injection	3 Address and Telephone No		- 9080
Farmington, NM 87499 4 Location of Well (Footage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF SUBMISSION  Abandoment Recompletion Plugging Back Carrier Final Abandoment Notice  Final Abandoment Notice  Tinal Abandoment Notice  Attering Casing Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well a directionally drilled give subsurface locations and measured and true vertical depths for all markers and zone of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is pue and offect Signed Thomas E, Mullins This space for federal or state office use Approved by Title: Date:  Dat	4. Location of Well (Footage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. Check APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Non-Routine Fracturing  Non-Routine Fracturing  Non-Routine Fracturing  Water Shut-Off Conversion to Injection Dispose Water  Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water Non-Routine Fracturing Non-Routine Fracturing Water Shut-Off C	4. Location of Well (Frostage, Sec. T. R. M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. County of Parish, State Rio Arriba Country New Mexico  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 Intert  Subsequent Report  Plagging Back Casing Repair Altering Casing Other  Unit Recompleted or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, settlement of the short or limited on the large completes on what Completes or exception limited on the large completes on subsurface locations and measured and rus vertical depths for all markors and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  11. I hereby certify that the foregoing it true and office use Approved by: Thomas E. Mullins  This is space for federal or state office use Approved by: Title:  Date:		(505) 325-5449	30-039-2158600
4. Location of Well (Footage, Sec, T. R., M. or Survey Description)  Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, R04W  11. County or Parish, State Rio Amba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  Abandoment Notice of Intert Subsequent Report Plugging Back Caring Repair Altering Casing Other Altering Casing Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of etating work. If well is directionally drilled give subsurface locations and measured and rue vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing is true and office the Signed Thomas E. Mulline This space for federal or state office use Approved by Title: Date:  Da	4. Location of Weal (Footage, Sec, T. R., M, or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. County or Parish, State Rio Amba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF ACTION  Abandoment  Abandoment Recompletion Plugging Back Carling Report Altering Casing Other  Altering Casing Other  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing of true and control of the control	4. Location of Well (Footage, Sec, T. R., M. or Survey Description)  Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. County or Parish, State Rio Amba 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 Intert  Abandoment Subsequent Report  Plugging Back Carrier Friends of mights conceived in Non-Routine Fracturing Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Report reads of mights conceived on Non-Routine Fracturing) Water Shut-Off Converion to Injection Dispose Water (New Routiness of perturent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markors and zones of perturent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is pure and series  Final Abandoment  Title: Engineering Manager  Date: 3-14-22.  Date:		(505) 520-54-5	
Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W    Cohemator Pictured Cliffs	Unit E, 1485 FNL & 793' FWL, Sec 20, T29N, R04W    Country or hawh, State   Richard Country   Routing	Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W    Country or Parks, Sate   Rio Arriba County	· · · · · · · · · · · · · · · · · · ·		10. Field and Pool, or Exploratory
Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. Country or Parkin', State Rio Amba Country New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  13. Notice of Intent  14. Intereby certify that the foregoing is tous and owners.  15. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of stating work.  16. Title: Engineering Manager  17. Country or Parkin', State Rio Amba Country New Mexico  17. Country or Parkin', State Rio Amba Country New Mexico  18. Change of Plans Notice of Intent  19. Notice of Intent  20. Change of Plans New Construction Non-Routine Fracturing Non-Routine Fractu	Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, RO4W  11. Courty 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 Subsequent Report Plugging Back Non-Routine Fracturing Non-Routine Non-R	Unit E, 1485' FNL & 793' FWL, Sec 20, T29N, R04W  11. County or Parish, State Rio Artiba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF SUBMISSION  TYPE OF ACTION  Abandoment Recompletion Plugging Back Caring Repair Altering Casing Other  Non-Router Fracturing Water Shut-Off Convenion to Injection Dispose Water (New Report reacher in multiple congenien on twell Completed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is pure and offect Signed: Thomas E. Mullins This space for federal or state office use Approved by: Title: Date: Da	4. Location of Well (Footage, Sec, T. R., M. or St	urvey Description)	Cohemader Distured Cliffs
Rio Arriba County New Mexico  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	Rio Arriba County New Mexico  12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Notice of Intent	Rio Arriba County New Mexico  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			
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Notice of Intent	12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Notice of Intent	12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Notice of Intent	Unit E, 1485' FNL & 793' FV	VL, Sec 20, T29N, R04W	
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent	12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent	12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF ACTION  Abandoment  Recompletion Plugging Back Casing Repair Attering Casing Other  Non-Routine Fracturing Water Stul-Off Converion to Injection Dispose Water Stul-Off Converion to Injection Dispose water Stul-Off Converion to Injection Dispose water decided of entering work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and coffect Signed: Thomas E. Mullins This space for federal or state office use Approved by: This is pace for federal or state office use Approved by: Tritle: Date: Date			Rio Arriba County
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent	12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION    Notice of Intent	12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF ACTION  Abandoment  Recompletion Plugging Back Casing Repair Attering Casing Other  Non-Routine Fracturing Water Stul-Off Converion to Injection Dispose Water Stul-Off Converion to Injection Dispose water Stul-Off Converion to Injection Dispose water decided of entering work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and coffect Signed: Thomas E. Mullins This space for federal or state office use Approved by: This is pace for federal or state office use Approved by: Tritle: Date: Date			New Mexico
TYPE OF SUBMISSION    Notice of Intent	TYPE OF SUBMISSION    Notice of Intent	TYPE OF SUBMISSION  TYPE OF ACTION  Abandoment  Abandoment  Subsequent Report  Final Abandonment Notice  Final Abandonment Notice  Tinal Abandonment Notice  Title:  Indicate the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  Title:  Indicate the Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  Title:  Engineering Manager  Date:	12 CHECK APPROPRIATE BOX(S) T	O INDICATE NATURE OF NOTICE, REPORT, O	
Notice of Intert   Abandoment   Recompletion   Non-Routine Fracturing   Non-Routine Fracturin	Notice of Intent	Notice of Intent		TYPE OF ACTION	ON
Subsequent Report   Final Abandonment Notice   Recompletion   Plugging Back   Casing Repair   Attering Casing   Converion to Injection   Dispose Water   Converion to Injection   Converion to Injec	Subsequent Report   Final Abandonment Notice   Altering Casing   Converient to Injection   Converient   Converient to Injection   Converient	Subsequent Report   Final Abandonment Notice   Plugging Back   Casing Repair   Water Shut-Off   Converient to Injection   Dispose Water   Converient to Injection   Converient   Converient to Injection   Converient   Converient Converient   Converient Converient   Converient Converi	THE OF CODMISSION		
Subsequent Report   Final Abandonment Notice   Recompletion   Plugging Back   Casing Repair   Attering Casing   Converion to Injection   Dispose Water   Converion to Injection   Converion to Injection   Converion to Injection   Converion to Injection   Dispose Water   Converion to Injection   Converion to Injection   Converion to Injection   Converion or incompleted Approved by:   Title:   Date:	Subsequent Report   Final Abandonment Notice	Subsequent Report   Final Abandonment Notice   Plugging Back   Non-Routine Fracturing   Non-Routine Routine   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Routine   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Fracturing   Non-Routine Routine   Non-Routine Fracturing   Non-Routine Routine   Non-Routine Fracturing   Non-Routine Routine Routine   Non-Routine Fracturing   Non-Routine Fra	Notice of Intent	Abandoment	Change of Plans
Subsequent Report    Final Abandonment Notice   Plugging Back   Casing Repair   Water Shut-Off   Correction to Injection   Dispose Water   (Note: Report reads of multiple completion to Injection   Dispose Water   (Note: Report reads of multiple completion on West   Correction of recompletion (Part Report reads of multiple completion on West   Correctionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.    Final Abandonment Notice   Plugging Back   Casing Repair   Water Shut-Off   Correction to Injection   Dispose Water   (Note: Report reads of multiple completion Report and tog Form)	Subsequent Report    Final Abandonment Notice	Subsequent Report    Final Abandonment Notice   Plugging Back   Casing Repair   Attering Casing   Water Shut-Off   Converient to Injection   Dispose Water   (Nove. Report results of multiple conspisent on Vivil   Completion or recompleted operations (Clearly state all pertinent details, and give pertinent detes, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.    Plugging Back   Casing Repair   Attering Casing   Water Shut-Off   Converient on undersconspisent on Vivil   Completion or recompleted or starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.    PRECEIVED OIL CON. DIV			
Casing Repair   Altering Casing   Converient to Injection   Dispose Water   (Note: Report results of multiple completion on West   Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.    Interest that the foregoing is true and correct   Signed: Thomas E. Mullins   Title: Engineering Manager   Date: 3-19-20.   Approved by:	Casing Repair   Altering Casing   Converion to Injection   Convertion to Injection   Convertion to Injection   Convertion to Injection   Convert	Sinal Abandonment Notice	Subsequent Report		Non-Routine Fracturing
Altering Casing Other Dispose Water Dispose	Altering Casing Other Dispose Water (New Report results of multiple completion on Well Completion or recompletion on Well Completion or recompletion or recomp	Altering Casing Other Converion to Injection Dispose Water (twos. Report results of multiple completen on Well Completen or Well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  114. I hereby certify that the foregoing & true and offect Signed: Thomas E. Mullins  This space for federal or state office use  Approved by:	Z Sapsodasiii Nobeli	H ** '	Water Shut-Off
Other Dispose Water  (since, Report results of multiple completion on Well Completion on recompletion on prompletion 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 work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  The CEIVED OIL CON. DIV DIST. 3  14. I hereby certify that the foregoing is true and confect Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  Title:  Date:  Date:  Date:	Other Dispose Water (Note: Report results of multiple completion on Well Completion 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 work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. Thereby certify that the foregoing is true and correct Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  Title:  Date:  D	Other Dispose Water (Note: Report results of multiple completion on Well Completion recognition report and Log Form)  13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and correct Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  SU.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements	Final Ahandonment Notice	, <del>                                    </del>	<b></b> 1
(Note: Report results of multiple completion on Well Completion or recompletion from Well Completion or recompletion flag of the starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  The report results of multiple completion for well and for extending work.  If hereby certify that the foregoing is true and correct  Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any	(Note: Report results of multiple completed on Well Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and cuffect  Signed:	(Note: Report results of multiple completed on Well Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERRGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  It hereby certify that the foregoing is true and correct  Signed:	Fillar Abaliconin encirco	· • • • • • • • • • • • • • • • • • • •	
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and correct  Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any	13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and confect  Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  Title:  Date:	13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.  If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and confect  Signed:		23 04161	
13. Describe Proposed or Completed Operations (Cleary state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.    Conditions of approval if any   Date:	13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is true and correct  Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  BUSC Section 1001, make it a crime for any person knowingly and witfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements.	13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.  ERGY OPERATING, LLC HAS SWABBED THIS WELL IN, AND RESTORED IT TO PRODUCTION.  14. I hereby certify that the foregoing is toug and confect  Signed:  Thomas E. Mullins  This space for federal or state office use  Approved by:  Conditions of approval if any  EU S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements repentations as to any matter within its jurisdiction.			
14. I hereby certify that the foregoing is true and confect  Signed:	14. I hereby certify that the foregoino is true and correct  Signed:	14. I hereby certify that the foregoing is true and correct  Signed:	ERGY OPERATING, LLC HAS SWABBED	THIS WELL IN, AND RESTORED IT TO PRODU	JUL 2001
	8 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements	8 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements	Signed:	Title: Engineering M	
	8 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements	8 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements			TO SECUL
THE C. SOCION THE COMES IN CHINGS BY ANY OPISION STRONGED AND INSIDE AND INCIDENCE OF THE CONTROL OF THE CONTRO		resentations as to any matter within its jurisdiction		and willfully to make to any department or agency of the I Inited Sta	
resentations as to any matter within its jurisdiction	17 2 / 200				