Form 3160-5 (JUNE 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED

Budget Bureau No. 1004-0135

Expires March 31, 1993
5. Lease Designation and Serial No.
MDA 701 00 0010

Do not use this form for proposals to drill or to deeper			
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT" for such proposals.		6. If Indian, Allotte or Tribe Name Jicarilla Apache Tribe	
Type of Well		N/A	
Oil Well X Gas Well Other:		N/A	
Name of Operator			
Mallon Oil Company		8. Well Name and No. 5 8 36 7 Jicarilla 30-03-34 No. 4	
Address and Telephone No.		9. Well API No.	
P.O. Box 2797 Durango, CO 81302	(970)382-9100	30-039-26326	
		10. Field and Pool, or Exploratory Area	
Location of Well (Footage, Sec., T., R., M., or Survey Description)		E. Blanco; Pictured Cliffs Son Jase	
039' FSL and 1977' FEL (NW/SE) Unit J		11. County or Parish, State	
ec. 34, T30N-R03W		Rio Arriba, New Mexico	
CHECK APPROPRIATE BOX(S) TO IN	DICATE NATURE OF NOTICE REPO	PT OP OTHER DATA	
TYPE OF SUBMISSION		OF ACTION	
THE OF GODINIOSION	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: Name Change	Dispose Water	
		(Note: Report results of multiple completion on Well	
Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dat		Completion or Recompletion Report and Log form.)	
Mallon Oil Company is requesting that the name to the following:	on the above referenced well be	pe changed	
licarilla 30-03-34 S I No	4 5678	970	
Jicarilla 30-03-34 SJ No	.4 5678 2000000000000000000000000000000000000	00 JUN 19 AHH	
A .	.4 (5678)	UEROUE.	
i. I hereby certify that he foregoing is true and correct	Constant of the second of the	UERQUE :: Ct	
. I hereby certify that he foregoing is true and correct	Title Office Manager	Date	
4. I hereby certify that the foregoing is true and correct Signed	Title Office Manager	Date	
4. I hereby certify that he foregoing is true and correct signed Gay Davis HIS SPACE FOR FEDERAL OR STATE OFFICIALIE)	Title Office Manager	Date 5/22/00	
4. I hereby certify that the foregoing is true and correct Signed Gay Davis	Title Office Manager	Date 5/22/00	
4. I hereby certify that he foregoing is true and correct Signed Gay Davis HIS SPACE FOR FEDERAL OR STATE OFFICIALE)	Title Office Manager Lands and Min	Date 5/22/00	
A I hereby certify that he foregoing is true and correct signed Gay Davis HIS SPACE FOR FEDERAL OR STATE OFFICELYE) Approved B Atruin Mileslan	Title Office Manager Lands and Min	Date	