Form 3160-5 (August 2007) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010 5. Lease Serial No.			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				NMNM0117529 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7. If Unit of CA/Agree	ement, Name and/or No.	
1. Type of Well ☐ Gas Well ☐ Other			DEC 0 1 2015	8. Well Name and No. FEDERAL 21B #1		
2. Name of Operator RIDGEWAY ARIZONA OIL CORP				9. API Well No. 30-041-20673		
3a. Address 777 N ELDRIDGE PARKWAY, SUITE 150 HO	3b. Phone No. (includ 832-485-8522	. Phone No. (include area code)		10. Field and Pool or Exploratory Area CHAVEROO, SAN ANDRES		
4. Location of Well (Footage, Sec., T., 1980 FSL & 1980 FWL SECTION 21, T.7S, R.33E	i)			Country or Parish, State DOSEVELT COUNTY, NM		
12. CHE0	CK THE APPROPRIATE BO	DX(ES) TO INDICATE	ENATURE OF NOTI	CE, REPORT OR OTHE	ER DATA	
TYPE OF SUBMISSION TYPE OF ACTION						
Notice of Intent	Acidize	Deepen Fracture Tree	at Rec	luction (Start/Resume) lamation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Constru Plug and Ab	Ξ	omplete porarily Abandon	Other	
Final Abandonment Notice	Convert to Injection	Plug Back	Wat	er Disposal		
2% CACL @ 4200-3500' (Per Bob l 250 psi. WOC. 11/09/15 Tagged plu displaced to 1500' @ 300 psi. 11/10 down, moved off. 11/10/15 Moved removed deadman. Cleaned location	ug @ 1947'. Perf'd tbg and)/15 Tagged plug @ 1478' in backhoe and welder, du	d csg @ 1900'. Cut tb . Perf'd csg @ 100' (j	g @ 1650', left fishir per Bob Hoskins w/	ng tool in well @ 1710' BLM). Sqz'd 35 sx cm	'. Sqz'd 60 sx cmt @ 1900 & t from 100' to surface. Rigged	
ACCEPTED FOR 6 MONTH PERIOD CSNC				RMITTING <swdinjection> /ERSIONRBDMS JRN TOTA GENVIROCHG LOC O PA P&A NR</swdinjection>		
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14. I harabu antifu that the formation in	me and correct			///	4	
 I hereby certify that the foregoing is to Name (Printed/Typed) JAMIE L HOGUE 	rue and correct.	Title VP REGULATORY AFFAIRS				
Signature at	2 Hogue		11/1//2015	CEPTED FOR	RECORD	
/	THIS SPACE	FOR FEDERAL	OR STATE OF	FICE USE	2015	
Approved by	0		Title	LAM	Andw	
Conditions of annances if and an attack	J A	varrant or certify	Office	CARLSBAD FIELD	OFFICE	
Accepted As To Pluggin Liability Under Bond Is F Surface Restoration Is C	Retained Until	е.		to make to any departmen	t or agency of the United States any false,	
Reclamation Due MAY	10 2016		M	AB/OCD 12/	Z/2015 M	