Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

SUN	DRY NOT	ICES AND R	EPORTS (ON WELLS
Do not use	this form	for proposa	ls to drill o	r to re-enter en
apandoned	well. Use	Form 3160-3	(APD) for s	uch proposals.

	If Indian Allottee or Tribe Name	<u> </u>
	14-20-603-734	
5.	Lease Serial No.	

SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or No.			
							1. Type of Well
Oil Well Gas Well			•		Name and N		
2. Name of Operator Vulco	n Minerals + Ener	37		52		50	
3a. Address 1000 R10		3b. Phone No. (include area code)		9. API Well No. 30045 10229			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area Horseshoe Gallyp			
Sec. 31 ,7311 660/NdE	1, R 16W			11. Count	ty or Parish,		
12. CHECK AI	PPROPRIATE BOX(ES)	TO INDICATE NATURI	E OF NOTICE, RE	PORT, C	OR OTHE	R DATA	
TYPE OF SUBMISSION		TYPI	E OF ACTION				
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start/ Reclamation	Resume)	_	er Shut-Off I Integrity	
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily Abai	ndon	Othe		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal				

Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

☐ Plug Back

See Attached

Convert to Injection



Water Disposal

14. I hereby certify the Name (Printed/Ty	at the foregoing is true and correct				
Nmoc		Oluggi's C Title			
Signature N	noco	Date		3/25/03	
	THIS	SPACE FOR FEDERAL OR	STATE OFFI	CE USE	
Approved by	Original Signed: Stephe	en Mason	Title		Date 3/25/03
certify that the applica	I, if any, are attached. Approval of ant holds legal or equitable title to a applicant to conduct operations then	those rights in the subject lease I	Office		
Title 18 U.S.C. Section	1001 and Title 43 U.S.C. Section 1	212 make it a crime for any person	on knowingly and	willfully to make to	any department or occurs of the United

API WELL # Well Name Well # Operator Name Type Stat County UL Sec Twp N/S Rng W/E Feet NS Ft EW Order_No 30-045-10229 HORSESHOE GALLUP UNIT 052 PLAYA MINERALS & ENERGY INC O A San Juan A 31 31 N 16 W 660 N 660 E 8 5/8 102 115S 4 1/2 1318 120S 2 1273 1140-1276

Procedure

MIRU, NUBOPE,

POOH Lay Down Rods & Tubing if present,

RIH with Gauge ring,

Pick up work string, Run Scrapper if required,

RIH Set CIBP 1050 ', cap with 218 'cement.

Test casing.

POOH lay down tubing.

RU wire line RIH, perforate @ 152 '+ - 50' under surface casing shoe or Mesa Verde base whichever is lower..

Establish Circulation; circulate cement to surface inside and outside casing

Cut off well head and install P&A marker

Cut off anchors 2' below ground

Clean and level location

SEC., TWN., RNG. 31-31N-16W

Mancos			85/3" 24#	
			152/10.96(1.18) = 12 SKS 50/4.3899(1.18) = 10 SKS 102/4.046(1.18) = 21 SKS 43 SKS	
			73	•
			1 Toc≈ 816 752 eH.	•
Gallop	882 '	-	Plvy 1050-832	
			(1050 - 832) +50/10.96 (1.18) = 21 sxs	
			Pert @ 1140'-1276'	•
CE CASING		\U I	1318' JUTERILEDATE CA	rS
٤"	• ·		5128 HOLE	

SURFACE CASING

SIZE HOLE ___"

SIZE CASING ___"

Annular Volume ___ ft³/ft.

Cement ___ sk

Volume ___ ft³

INTERMEDIATE CASINE

SIZE HOLE ______"

SIZE CASING ____"

Annulur Volume ____ f

Cement ____ s

Volume ___ f