Form 3160-5 (April 2004)

UNITED STATES

DEPARTMENT OF	THE INTERIOR
BUREAU OF LAND	MANAGEMENT

Form 3160-5 (April 2004)	UNITED STATES DEPARTMENT OF THE INTERIOR			FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007	
	BUREAU OF LAND MANAGEMENT			5. Lease Scrial No.	
	NOTICES AND REI			14-20-603-2168 6. If Indian, Allottee or Tribe Name	
Do not use ti abandoned w	nis form for proposals t ell. Use Form 3160-3 (o drill of to re-e APD) for such pro	pposals. FM 2	o. II indian, Allottee or Tribe Name	
	IPLICATE- Other insti			7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Gas Well Other 010 FARMINGTOR		ARMINGTOR	NA 8. Well Name and No.		
2. Name of Operator Richardson	Operating Company			NV Navajo 34 #2	
3a Address 3b. Phone No. (include area code)		9. API Well No. 30-045-31039			
3100 La Plata Highway, Farm		505-564-3100		10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			West Kutz Pictured Cliffs 11. County or Parish, State		
1080' FNL & 1870' FWL Sec. 34, T29N, R14W			San Juan County, New Mexico		
12. CHECK A	PPROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOTICE. RE	EPORT, OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION					
	Acidize	Deepen Deepen	Production (Star	t/Resume) Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	Well Integrity	
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily Aba	Other	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
Attach the Bond under which is following completion of the intesting has been completed. For determined that the site is read	the work will be performed or provi volved operations. If the operation and Abandonment Notices shall be	ide the Bond No. on file v results in a multiple comp filed only after all require	with BLM/BIA. Require eletion or recompletion in ments, including reclama	e vertical depths of all pertinent markers and zones. d subsequent reports shall be filed within 30 days a new interval, a Form 3160-4 shall be filed once dion, have been completed, and the operator has surface casing in this well.	
			(1) (1) (1) (1) (1) (1) (1) (1) (1) (1)		
14. I hereby certify that the fore Name (Printed/Typed)	egoing is true and correct Breksted	Title	Pomolian	LE Administrator	
Signature	Bichsteel	Date		7/06/2004	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by	Am book		itle Petr.	Eng Date 7 16 04	
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to	Nor equitable title to those rights		Office	<u> </u>	

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)