Form 3160-5 (September 2001)

UNITED! TES DEPARTMENT OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Evnires: January 31, 2004

•	BOILEAU OF LINE WITHIN	SEMENT		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. SUBMIT IN TRIPLICATE - Other instructions on reverse side				Jicarilla Conti		
				6. If Indian, All	lottee or Tribe Name	
				Jicarilla Apache Tribe		
				7. If Unit or CA/Agreement, Name and/or No.		
SUBMIT IN TR	IPLICATE - Other instruc	ctions on reverse	siae			
1. Type of Well				24939		
☐ Oil Well ☐ Gas Wel! ☐ Other				8. Well Name and No.		
2. Name of Operator				Jicarilla 464 SJ No. 1 9. API Well No.		
Mallon Oil Co, an indirect wholly-owned subsidiary of Black Hills E & P 3a. Address 3b. Phone No. (ficilide area code)						
			ASS THE REAL PROPERTY OF THE P			
350 Indiana Street, Suite 400 Go	720-210-1311 JUN 2004		Cabresto Canyon, Tertiary			
4. Education of Wen (1 doinge, been, 1, 10, 110, or but tey best sprior)					Parish, State	
Sec. 30, T30N-R03W	······	E		Ŋ	,	
		100	**************************************	Rio Arriba. N	IM	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOTICE, RI	EPORT, OR O	THER DATA	
TYPE OF SUBMISSION		74.	E OF ACTION			
	Acidize	Deepen	Production (Start	/Resume)	Water Shut-Off	
☐ Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		Other	
Subsequent Report	Change Plans	Plug and Abandon	Temporarily Aba	ındon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal			
Attach the Rond under which the	t wholly-owned subsidiary of Black H WITH SAME. PU CIBP & TII WITH TUBING TAG CIBP & P PLUG). TOH WITH 38 JTS TO UG. CLEAN UP EQUIPMENT.	de the Bond No. on file we sults in a multiple complified only after all require ack Hills Exploration & WITH SAME. SET (U.5'. MIRU HALIBUR APPROX. 298' PUMP	rith BLM/BIA. Require etion or recompletion in ments, including reclar recompletion has plug recompletion in the plug recompletion has plug recompleted in the plug recompleted recomplete	ed subsequent report a new interval, a mation, have been eged and abando. SURE TEST PL 7 PUMP 5 SAC OM 298' TO 19	orts shall be filed within 30 day if Form 3160-4 shall be filed oncompleted, and the operator had need the above referenced well-by TO 500 PSI-HELD 15 CKOF CEMENT ON TOP OF 8'. TOH. NDBOP. PU TWO	
14. 1 hereby certify that the foregoin Name (PrintedlTyped) Allison Newcomb	Λ I	Title Engi	necring Technician			
Signature Ullion	1 Thewcomb	Date 5/11	/2004			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						

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.

Name

(Printed Typed)
Office

Title

Date

Approved by (Signature)

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.