

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB No. 1004-0135

**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**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>JICARILLA CONTRACT #97</b>
2. Name of Operator <b>PATINA OIL &amp; GAS CORPORATION</b>		6. If Indian, Allottee or Tribe Name <b>JICARILLA APACHE</b>
3a. Address and Telephone No. <b>5802 HIGHWAY 64, FARMINGTON, NM 87401</b>	3b. Phone No. (include area code) <b>(505) 632-8056</b>	7. If Unit or CA/Agreement, Name, and/or No. <b>RECEIVED 070 FARMINGTON NM</b>
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) <b>1100' FNL &amp; 1550' FWL - UL "C" SEC. 5, T26N, R3W</b>		8. Well Name and No. <b>TRIBAL C #5A</b>
		9. API Well No. <b>30-039-21497</b>
		10. Field and Pool, Or Exploratory Area <b>BASIN DAKOTA/BLANCO MESA VERDE</b>
		11. County or Parish, State <b>RIO ARRIBA COUNTY, NEW MEXICO</b>

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION		
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Recomplete
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> New Construction	<input type="checkbox"/> Temporarily Abandon
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Production (start/resume)	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Deepen	<input type="checkbox"/> Reclamation	<input checked="" type="checkbox"/> Other <u>Commingle</u>

13. 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 recompletes 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.)

10/27/2004 See attached "Final Report".



*DHC1632AZ*

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) <b>KAY S. ECKSTEIN</b> e-mail: keckstein@patinasanjuan.com	Title <b>PRODUCTION TECHNICIAN</b>
Signature <i>Kay S. Eckstein</i>	Date <b>October 27, 2004</b>

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by <i>/s/ David R. Sittler</i>	Title <b>Division of Multi-Resources</b>	Date <b>DEC 17 2004</b>
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.		
Office		

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



# Patina San Juan, Inc.

## DAILY OPERATIONS REPORT

<b>Lease Name &amp; Well Number</b> Tribal C # 5A		<b>Report date:</b> 10/27/04	<b>Purpose:</b> Commingle	<b>Operation Type</b>	
		<b>Report time:</b> 0700 Hrs			
<b>Report #:</b> 1	<b>AFE #:</b> 111643	<b>RKB:</b> 12.00	<b>Zone of interest:</b> DAKOTA-MESA VERDE	<b>Recompletion</b>	X
<b>Supervisor:</b> H Hill	<b>Formation:</b> Mesa Verde			<b>Workover</b>	
<b>Phone #:</b>	<b>Perfs:</b> 6132-6262		<b>Formation:</b> Dakota		
<b>Fax #:</b>			<b>Perfs:</b> 8196-8352		
<b>Plug Back Depth:</b> 8,416	<b>Tubing Data:</b> 192 Jts. 2 3/8 4.7# J-55 E.O.T.L. @ 8232.90				
<b>Packer Depth:</b>	<b>Casing Data:</b> 7" 23# 5 1/2 15.5# Liner Top @ 4146				
<b>SITP:</b> @					
<b>SICP:</b> @					

### Last 24 Hour Activity Summary

Move in & rig up Drake #19. Nipple down wellhead. Nipple up BOP. Trip out of hole with tubing & packer. Trip in hole with tubing. Broach tubing. Land tubing @ 8232.90'. Pressure test to 1,500psi. Swab tbg dry. Nipple down BOP. Nipple up wellhead. Return to production.

### Last 24 Hour Activity Detail

Time		Elapsed Time	Description
From	To		
7:00	7:30	0:30	Warm up Rig, Hold Safety Meeting
7:30	8:30	1:00	Rig up Pulling Unit, Smother well W/ 20 BBL. 2% KCL, Nipple Down Well Head.
8:30	9:30	1:00	Nipple up B.O.P., Rig up Tbg. Equip.
9:30	10:30	1:00	Packer Stuck, Work Tbg. To get Free, Tag Sand @ 8395
10:30	12:00	1:30	T.O.O.H. W/ 194 Jts. 2 3/8 4.7# J-55 Tbg., Remove 5 1/2" R-3 Single Grip Packer From String.
12:00	13:30	1:30	Lay down 2 Jts, T.I.H. W/ 192 Jts Tbg. E.O.T.L. @ 8232.90, Broaching Tbg. Going in.
13:30	14:30	1:00	Drop Standing Valve, Test Tbg. To 1,500 P.S.I.
14:30	16:00	1:30	Swab Tbg Dry, Retrieve Standing Valve.
16:00	17:00	1:00	Land Tbg. On Hanger, Rig down Floor & Tbg. Equip, Nipple Down B.O.P., Nipple up Well Head.
17:00	18:00	1:00	Rig down Pulling Unit.
			FINAL REPORT
			K.B. 10.00'
			252 Jts. 8223.50'
			S.N. .87'
			S.T.C. .43'
			E.O.T.L. @ 8232.90
<b>Total hours:</b>		11:00	

### Comments

### Projected 24 Hours

### Costs

<b>Daily Cost</b>	<b>Total Operation Cost</b>	<b>AFE Operation Cost</b>	<b>Total Well Cost</b>	<b>AFE Total Cost</b>
\$6,050	\$6,050	\$0	\$6,050	\$0