

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010**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. NMSF078875
2. Name of Operator HUNTINGTON ENERGY, L.L.C.		6. If Indian, Allottee or Tribe Name
3a. Address 908 N.W. 71ST ST. OKLAHOMA CITY, OK 73116		7. If Unit or CA/Agreement, Name and/or No CANYON LARGO UNIT
3b. Phone No. (include area code) Ph: 405-840-9876 Ext: 129 Fax: 405-840-2011		8. Well Name and No. CANYON LARGO UNIT 506
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 33 T25N R6W Mer NMP NWNW 718FNL 976FWL 36.361690 N Lat, 107.477950 W Lon		9. API Well No. 30-039-31098
		10. Field and Pool, or Exploratory BASIN DAKOTA
		11. County or Parish, and State RIO ARRIBA COUNTY, NM

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

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

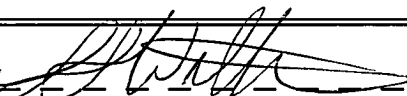
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 recompleat 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.)

Huntington Energy, L.L.C. will use a closed-loop system for the above referenced well. The well has been permitted and approved for a reserve pit/below grade tank. A closed-loop system will be used instead.

RCVD APR 4 '12
OIL CONS. DIV.
DIST. 3

14. I hereby certify that the foregoing is true and correct. Electronic Submission #134003 verified by the BLM Well Information System For HUNTINGTON ENERGY, L.L.C., sent to the Farmington Committed to AFMSS for processing by STEVEN WILLEMS on 03/30/2012 ()	
Name (Printed/Typed) CATHERINE SMITH	Title REGULATORY
Signature (Electronic Submission)	Date 03/27/2012

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title ERS	Date 3-30-12
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 FFO

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ******NMOCD**