## RECEIVED

Form 3160- 5

## **UNITED STATES**

AUG 3 0 2012

FORM APPROVED

SEP 04 2012

PARAMINGTON FIELD OFFICE

| ОМВ | No | 1004- | 013 |
|-----|----|-------|-----|
|     |    |       |     |

| (August 2007)   | DEPARTMENT OF   | THE INTERIOR                          |                  |                 | OMB No 1004-0137                        |  |  |  |
|---|---|---------------------------------------|------------------|-----------------|---|--|--|--|
|   | BUREAU OF LAND  | MANAGEMENT                            | Farmington F     | old Office      | Expires July 31,2010                    |  |  |  |
|   | 5 Lease Serial N<br>/lan aueine<br>Contract   | lo.                                   |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
| E<br>at   | 6 If Indian, Allottee, or Tribe Name  Jicarilla Apache Tribe                            |                                       |                  |                 |   |  |  |  |
|   |   | Agreement Name and/or No.             |                  |                 |   |  |  |  |
| SUBMIT  1. Type of Well   |   | <b>3</b>                              |                  |                 |   |  |  |  |
| 1. Type of Well Oil Well Gas Well   | Other   |                                       |                  | 8. Well Name an | d No.                                   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
| 2. Name of Operator   | 9. API Well No.   | 464-29 #10                            |                  |                 |   |  |  |  |
| Black Hills Gas Resour  | 30-039-2  | 5761                                  |                  |                 |   |  |  |  |
| 3a. Address 3b Phone No. (include area code) 3200 N 1st St, Bloomfield, NM 87413 (505) 634-5104 |   |                                       |                  |                 | 10. Field and Pool, or Exploratory Area |  |  |  |
| 4. Location of Well (Footage, Sec., T   | <del></del>   | (303) 034-3104                        |                  | 4               | o PC / Cabresto Cnyn Tert.              |  |  |  |
| 1,600 FSL & 1,800 FEL Sec. 29 T30N R3W (UL: J)  |   |                                       |                  |                 | rish, State                             |  |  |  |
| ,   | -,  |                                       |                  |                 |   |  |  |  |
| Rio Arriba County, New Mexico   |   |                                       |                  |                 |   |  |  |  |
| 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA                |   |                                       |                  |                 |   |  |  |  |
| TYPE OF SUBMISSION  |   | · · · · · · · · · · · · · · · · · · · | TYPE OF ACTION   |                 |   |  |  |  |
| Notice of Intent  | Acidize   | Deepen                                | Production ( S   | tart/ Resume)   | Water Shut-off                          |  |  |  |
| <del></del>   | Altering Casing   | Fracture Treat                        | Reclamation      |                 | Well Integrity                          |  |  |  |
|   |   | 1                                     | Reciamation      |                 |   |  |  |  |
| Subsequent Report   | Casing Repair   | New Construction                      | Recomplete       |                 | Other                                   |  |  |  |
|   | Change Plans  | Plug and abandon                      | Temporarily A    | bandon          |   |  |  |  |
| Final Abandonment Notice  | Convert to Injection  | Plug back                             | Water Disposa    | 1               |   |  |  |  |
|   | Operation Clearly state all pertinent detail  | <u> </u>                              |                  |                 | duration thereof                        |  |  |  |
|   | onally or recomplete horizontally, give su  |                                       |                  |                 |   |  |  |  |
|   | work will performed or provide the Bond   |                                       |                  |                 |   |  |  |  |
|   | red operations. If the operation results in<br>Abandonment Notice shall be filed only a |                                       |                  |                 |   |  |  |  |
| determined that the site is ready for   | • •   | -                                     |                  | -               |   |  |  |  |
| Black Hills Gas Resources i   | ntends to plug and abando   | n Jicarilla 464-29 #                  | 10 and will subm | it the proced   | ure within the next 60 days.            |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 | POINCEP5117                             |  |  |  |
|   |   |                                       |                  |                 | 86VQ5555.517.                           |  |  |  |
|   |   |                                       |                  |                 | DIST. 3                                 |  |  |  |
|   |   |                                       |                  |                 | vioi. o                                 |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
|   |   |                                       |                  |                 |   |  |  |  |
| A ( ) (   |   |                                       |                  |                 | •                                       |  |  |  |
| Argented t  | ex (Keeprol   |                                       |                  |                 |   |  |  |  |
| 14. I hereby certify that the foregoing is  | s true and correct. Name (Printed/ Type   | d)                                    |                  |                 |   |  |  |  |
|   |   | · 1                                   |                  |                 |   |  |  |  |
| Daniel Manus  |   | Title                                 | y Techician      |                 |   |  |  |  |
| 72.11 1 2x 2x 2   |   |                                       |                  |                 |   |  |  |  |
| Signature Many Date Aug 30, 2012  |   |                                       |                  |                 |   |  |  |  |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE  |   |                                       |                  |                 |   |  |  |  |

entitle the applicant to conduct operations thereon.

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 any department or agency, of the United fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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

Approved by

Title

Office