Form 3160-5 (September 2001)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

5. Lease Serial No.

11/11		

JICIO

6. If Indian, Allottee or Tribe Name

Licerille	Anacha Triba

				Jicarilla Apache Tribe								
	PLK	CATE - Other instru	icti	ions on reve	rse sidi	)	7. If Unit o	or CA/	'Agreeme	nt, N	ame and/or	No.
1. Type of Well	ا مید	_					9 Wall M				1	
Oil Well Gas Well Other  2. Name of Operator					8. Well Name and No.							
2. Name of Operator CDX Rio, LLC					Jicarilla C #8E  9. API Well No.							
3a. Address			3	b. Phone No. (inc	lude area	code)	30-039-2		•			
2010 Afton Place, Farmington, N	M 87	<i>1</i> 401	5	05-326-3003			10. Field a		ol, or Exp	lorat	ory Area	
4. Location of Well (Footage, Sec.,				00 020 0000			Basin Da	kota				
NENE Sec. 13, T26N, R5W, NM	PM						11. County		,	е		
					Rio Arriba, NM							
12. CHECK APP	ROP	RIATE BOX(ES) TO	) IN	DICATE NAT	TURE O	F NOTICE, R	EPORT, O	R O	THER I	)AT	A	··· <u>-</u>
TYPE OF SUBMISSION					TYPE O	F ACTION						
		Acidize		Deepen	$\Box$	Production (Start	/Resume)		Water S	hut-C	Off	
Notice of Intent		Alter Casing		Fracture Treat		Reclamation			Well Int	egrity	/	
Subsequent Report		Casing Repair		New Construction	n 🔲	Recomplete			Other _			
		Change Plans		Plug and Abando	n 🔲	Temporarily Aba	andon					
Final Abandonment Notice		Convert to Injection		Plug Back		Water Disposal						
testing has been completed. Fina determined that the site is ready for 9/30/05 well returned to production.	or fina	il inspection.)		OCT 2 OL CONS DIST. 3	67	7 17 12 13 14 75 75 11 10 10 10 10 10 10 10 10 10 10 10 10	nation, nave		RECEIVED NECEIVED	and other states	2 2 3	л наѕ
14. 1 hereby certify that the foregoing Name (PrintedlTyped)	is tru	e and correct									,	
Enid Grubb	$\triangle_{\wedge}$			Title ]	Productio	n Accounting Sp	pecialist					
Signature Signature	L,	No		Date	9/30/05							
		THIS SPACE FO	OR.	FEDERAL OR	STATE	OFFICE USE		滅	(Arriva		1	'nD
Approved by (Signature)					Name (Printed/Ty	ped)		Title	OCT	0 /	2005	
Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to co	or ea	uitable title to those right			Office			RΥ	Date	sn~		

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.