Form 3160-5 (November 1994)

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

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

Lease Serial No.

		6. If Indian, Allottee or Tribe Name
abandoned well. Use Form 3160-3 (APD) fo	Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.	
	200	Jicarilla Apache 7. If Unit or CA/Agreement, Name and/or N 5. DFC 1 111 8 44
SUBMIT IN TRIPLICATE – Other instructi	ions on reverse side 💎 🕕	5 DEC 1 AM 8 22
Type of Well		RECEIVED
X Oil Well Gas Well Other		8-7 Well-Name and NOTON AM
2. Name of Operator		Chacon Amigos #101
Im Ridge Exploration Company, LLC		9. API Well No.
a. Address 3b	. Phone No. (include area code)	30-043-20500
PO Box 156, Bloomfield, NM 87413 50	05-632-3476 x 201	10. Field and Pool, or Exploratory Area
Location of Well (Footage, Sec., T., R., M., or Survey Description)		West Lindrith Gallup Dakota
850' FSL X 790' FWL		11. County or Parish, State
L - Sec.7-T22N-R2W		Sandoval County, NM
2. CHECK APPROPRIATE BOX(ES) TO INDICATE NATUR	E OF NOTICE, REPORT, OR OTH	HER DATA
TYPE OF SUBMISSION TYPE OF ACTION		
X Notice of Intent	Deepen Production	(Start/Resume) Water Shut-Off
Alter Casing	Fracture Treat Reclamation	· / <u>—</u> · · · · · ·
Subsequent Report Casing Repair	New Construction Recomplete	
Change Plans	Plug and Abandon Temporarily	y Abandon
Final Abandonment Notice Convert to Injection	Plug Back Water Dispo	osal
his well is on our workover rig schedule to repair a si re anticipate this work to be completed within the nex	•	quest an extension until January
1, 2006, in order to complete the repair work as plan	• •	DEC 20
1, 2006, in order to complete the repair work as plan	• •	DEC an
Λ	• •	DEC 200 PEC 200 PECEIVEL CONS. D DIST. 3
1, 2006, in order to complete the repair work as plan 4. I hereby pertify that the foregoing is true and correct Name (Printed/Typed)	• •	DEC 20
4. I hereby certify that the foregoing is true and correct	ned, and to return this well to	DEC 200 PEC 200 PECEIVEL CONS. D DIST. 3
4. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	Title Product	DEC 200 PECEIVEL ON CONS. D ONST. 3
4. I hereby bertify that the foregoing is true and correct Name (Printed/Typed) Army Mackey Signature	Title Product	DEC 200 CONS. D. CONS
4. I hereby bertify that the foregoing is true and correct Name (Printed/Typed) Army Mackey Signature	Title Product Date Novem	DEC 200 CONS. D. CONS
4. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Army Mackey Signature THIS SPACE FOI	Title Product Date Novem R FEDERAL OR STATE USE	DEC 200 CONS. D CONS. D Stion Assistant ber 30, 2005

(Instructions on reverse)