

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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 <i>Hallador</i>		5. Lease Serial No. NMSF-078095 A
2. Name of Operator QUESTAR EXPLORATION & PRODUCTION CO.		6. If Indian, Allottee or Tribe Name N/A
3a. Address 1050 17TH STREET, SUITE 500 DENVER, CO 80265	3b. Phone No. (include area code) 303-672-6900	7. If Unit or CA/Agreement, Name and/or No. N/A
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1418 FSL & 1267 FEL 7-31N-11W, NMPM		8. Well Name and No. HORTON 1 D
		9. API Well No. 30-045-33065
		10. Field and Pool, or Exploratory Area Blanco Mesa V., Basin Dakota
		11. County or Parish, State SAN JUAN, NM

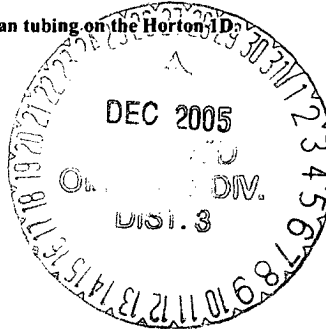
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" 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 <u>Set Tubing</u>
	<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 recomplete 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.)

On 12/06/2005, Questar Exploration & Production Company ran tubing on the Horton 1 D.

TUBING DETAIL:
2-3/8" collar
2-3/8" SN
ran 227 jts 2-3/8" J-55 8rd tbg
tbg landed @ 7212.88' KB



2005 DEC 12 PM 2 09
RECEIVED
070 FARMINGTON NM

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) LANI P. RIEGER		Title SR. ENGINEERING TECHNICIAN
Signature <i>Lani Rieger</i>		Date 12/08/2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____	Title _____	Date DEC 15 2005
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 FARMINGTON FIELD OFFICE	ACCEPTED FOR RECORD

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.

(Instructions on page 2)

NMOCDD