Form 3160-5 (April 2004)

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

FORM APPROVED
OM B No. 1004-0137
Expires: March 31, 200

5. Lease Serial No.

IMDA	751	-05-1025,	Tract A
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SUNDRY NOTICES AND REPORTS ON WELLS					51-05-1025, Tract A	
Do not use this form for proposals to drill or to re-enter an					6. If Indian, Allottee or Tribe Name	
abandoned well. Use Form 3160 - 3 (APD) for such proposals.					ıntain Ute	
				5 2011 :	O. 11 . 11 . 11 . 11 . 11 . 11 . 11 . 1	
SUBMIT IN TR	IPLICATE- Other instru	uctions on reve	erse side.	7. II Unitoi	CA/Agreement, Name and/or No.	
1. Type of Well		20	25762720			
Oil Well	Gas Well Other	A B	100	8. Well Na	ne and No.	
2. Name of Operator File Son June	•		3		untain Tribal 35-D	
2. Name of Operator Elk San Juan	ı, Inc.		2000	9. API We		
3a Address		3b. Phone No. man	ide area code	300453		
1401 17th. Street, Suite 700, D		303-296-4505	W-111/2-16-24	10	d Pool, or Exploratory Area	
4. Location of Well (Footage, Sec.,	T., R., M., or Survey Description)	ON ON		Basin I	·	
1: 1605' FSL, 945 FEL, CSE Section 35-T31N-R15W					or Parish, State	
		300	The Control of the Co	San Ju	an County, NM	
10 CHECK A	DDD ODDIATE DOV(EC) TO	LIDICATE MARIE	in E- OF A TOTAL D	EDORT OF	OTHER DATA	
12. CHECK A	PPROPRIATE BOX(ES) TO	INDICATE NATO	TRE-OF NOTICE, R	EPUKI, UK	OTHER DATA	
TYPE OF SUBMISSION		T	YPE OF ACTION			
	Acidize	Deepen	Production (Sta	rt/Resume)	Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity	
77.	Casing Repair	New Construction			Other Vary BOP Stack Size	
✓ Subsequent Report	Change Plans	Plug and Abandor		andon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		· · · · · · · · · · · · · · · · · · ·	
1740 hrs 2/14/06.	A STANCES CONTRACTOR STANCES		.	FORES	T SERVICE	
	accepted fo	h hereda	, ,	DURANG	O, CO 81391	
		711		rrn	A 9 200C	
	BY: UK	2117/04	2	FEB	2 2 2006	
	San Juan Flason	ma Araa				
	Bureau of Land			REC	EIVED	
	STACKT OF THE	TO THE PARTY OF TH	CPOES	a Change As		
•						
14. I hereby certify that the fore	going is true and correct					
Name (Printed/Typed)		Tielo	Fi	_		
Karin Kuhn		1 lue	Engineering Technicia	in		
Signature X Olyun	Kuhn	Date	0	2/15/2006		
/ ` '	THIS SPACE FOR F	EDERAL OR	STATE OFFICE	USE		
Approved by			Title_	I	Date	
Conditions of approval, if any, are				F 7 7 7 1		
certify that the applicant holds lega which would entitle the applicant to		the subject lease	Office			
		crime for any name	browingly and usilfully	n make to	department or agency of the United	
States any false, fictitious or fraudu	ent statements or representations a	s to any matter within	its jurisdiction.	omake to an	department of agency of the Office	

(Instructions on page 2)

