

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

RECEIVED

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

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.  
**NMSF 079161**

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
 Oil Well  Gas Well  Other

7. If Unit or CA/Agreement, Name and/or N

8. Well Name and No.

2. Name of Operator  
**DJR Operating, LLC**

9. API Well No.  
**30-039-06634**

3a. Address  
**1600 Broadway Suite 1960 Denver, CO 80202**

3b. Phone No. (include area code)  
**303-595-7433**

10. Field and Pool, or Exploratory Area  
**Blanco PC South**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**660' FNL x 660' FEL  
A Sec.9-T26N-R7W**

11. County or Parish, State  
**Rio Arriba County, NM**

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" 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 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>Change of Operator</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 Operations (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.)

Effective May 1st, 2017, operations of the above well were transferred from Elm Ridge Exploration CO LLC to DJR Operating, LLC. Bond coverage pursuant to 43 CFR 3104 for lease activities is being provided by DJR Operating, LLC under its nationwide bond, Bond # NMB001464. DJR Operating will be responsible for compliance under the terms and conditions of the lease.

OIL CONS. DIV DIST. 3  
JUN 14 2017

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) <b>Dominic J. Bazile II</b>	Title <b>EVP-COO</b>
Signature 	Date <b>May 1, 2017</b>

THIS SPACE FOR FEDERAL OR STATE USE

Approved by <b>Dave Mankiewicz</b>	Title	Date
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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
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ACCEPTED FOR RECORD  
MAY 23 2017

Title 18 U.S.C. Section 1001, makes 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 reverse)

NMOCD