

Form 3160-5  
(April 2004)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.

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		5. Lease Serial No. IMDA 751-05-1025, Tract B
2. Name of Operator Elk San Juan, Inc.		6. If Indian, Allottee or Tribe Name Ute Mountain Ute
3a. Address 1401 17th Street, Suite 700, Denver Colorado, 80202	3b. Phone No. (include area code) 303 296 4505	7. If Unit or C/A Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) O: 1085' FSL, 1385' FEL, CSE Section 14-T31N-R15W		8. Well Name and No. Ute Mountain Tribal 14D
		9. API Well No. 3004533417
		10. Field and Pool, or Exploratory Area Basin Dakota
		11. County or Parish, State San Juan County, 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"/> Recombine	<input checked="" type="checkbox"/> Other Drilling Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Overview
	<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 recompleting 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.)

The subject well was spud on 1/6/06. The Patterson Rig #753 was moved in and rigged up. A 12 1/4" hole was drilled to 386'; 8 5/8", 244', 355', surface casing was set @ 370' and Halliburton cemented with 290 sx cmt w/ 3% CaCl<sub>2</sub> & 1/4# floccle; cement was circulated, bumped plug, held ok. Pressure test BOPs, chk manifold & vibs, all good. Pressure test csg to 1000# for 30 min, ok. Dried out cmt. Dried 7 7/8" hole to TD @ 3300' on 1/24/2006. The well was logged (HRI, SDI/DSN, BCS). Set 5 1/2", 15.5#, J59, L.T.&C csg to 3296'. Cmt'd 5 1/2" csg w/ 65 sx 65/35 POZ w/ 6% gel, 5# gilsonite, 1/4# floccle & 2% CaCl<sub>2</sub>, followed by 200 sx 50/50 POZ w/ 2% gel, 5# gilsonite, 1/4# floccle & 1/10% CFR-3. Bumped plug, held ok. Opnd DV tool & pumped 160 sx 65/35 POZ w/ 6% gel, 5# gilsonite, 1/4# floccle & 2% CaCl<sub>2</sub>, followed by 50 sx POZ w/ 2% gel, 5# gilsonite, 1/4# floccle & 1/10% CFR-3, displaced w/ freshwater to DV tool. Shut DV tool. Pressure test csg to 500# during completion operations.

TOC 1525' (OAL)

DR 6/13/06  
 [Signature]  
 [Stamp]

14. I hereby certify that the foregoing is true and correct  
 Name (Printed/Typed)

Karin Kuhn

Title Engineering Technician

Signature

Date

06/08/2006

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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)

OPERATOR'S COPY JUN 12 2006

Bureau of Land Management