

submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Sundry Notices and Reports on Wells

2007 FEB 7 10 10 AM

1. Type of Well
GAS

2. Name of Operator
CDX RIO, LLC

3. Address & Phone No. of Operator

2010 Afton Place, Farmington, New Mexico 87401 (505) 326-3003

4. Location of Well, Footage, Sec., T, R, M
1250', FNL, 1945' FWL, Sec.4, T-26-N, R-4-W, NMMPM

DHC-2362az

5. Lease Number
Jicarilla Contract 102
6. If Indian, All. or
Tribe Name
Jicarilla Apache
7. Unit Agreement Name

8. Well Name & Number

Jicarilla 102 #10M
9. API Well No.

30-039-29770
10. Field and Pool

Blanco MV/Basin DK
11. County and State

Rio Arriba Co, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

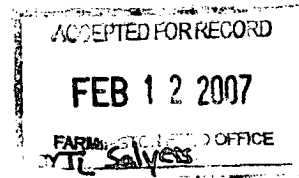
Type of Submission	Type of Action
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other

☐ Change of Plans
☐ New Construction
☐ Non-Routine Fracturing
☐ Water Shut off
☐ Conversion to Injection

RCVD FEB14'07
OIL CONS. DIV.
DIST. 3

13. Describe Proposed or Completed Operations

11-18-06 MIRU. ND WH. NU BOP. Test BOP. SD for weekend.
11-20-06 PT 4 1/2" lnr to 1500 psi/15 min, OK. TIH w/3 7/8" bit. SDON.
11-21-06 TIH. Tag top of lnr @ 4218'. Tag fill @ 8338'. Drill cmt stringers @ 4338-8445'. Drill out float collar @ 8445'. SDON.
11-22-06 TOO H w/bit. SD for holiday.
11-27-06 TIH w/3 7/8" bit to 8455'. Drill out 5' into shoe joint. Left 5' cmt in shoe joint. Circ hole clean w/180 bbl 2% KCl wtr. TOO H w/bit. ND BOP. NU WH. RD. Rig released.
11-29-06 MIRU. Ran GSL & CBL-CCL-GR @ 0-8461', TOC @ surface. RD.



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

Signed Nancy Oltmanns Title Agent Date 2-6-07

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any: