Form 3160-5 (November 1994)

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 reenter an

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

SEP 2 8 2007

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Lease Serial No.

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6. If Indian, Allottee or Tribe Name

abandoned well. Use Form 3160-3 (APD) for such proposals.					RCVD OCT 1 '07	
SUBMIT IN TRIPLICA	TE Other instruc	tions on revers	e side		Agreement, Name and/or No. JIL CONS. DIV. DIST. 3	
1. Type of Well X Oil Well Gas Well Other 2. Name of Operator					8. Well Name and No. Ando Hixon #2	
Elm Ridge Exploration Co, LLC 3a. Address 3b. Phone No. (include area code)					9. API Well No. 30-045-26869	
PO Box 156, Bloomfield, NM 87413 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		505-632-3476 x20	·	10. Field and Pool, or Exploratory Area Bisti Lower Gallup		
์ข980' FNL X 2310' FWL		!	11. County or Parish, State San Juan County, NM			
"F" - Sec.31-T25N-R11W				unty, iNivi		
12. CHECK APPROPRIATE BOX(ES) To		F NOTICE, REPORT	, OR OTHER DA	ΓA		
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (S Reclamation Recomplete Temporarily Water Dispos		Water Shut-Off Well Integrity Other	
Describe Proposed or Completed Operations (of If the proposal is to deepen directionally or Attach the Bond under which the work will be Following completion of the involved operation Testing has been completed Final Abandon determined that the site is ready for final inspection.) This Well Was returned to productio	recomplete horizontally, give sub pe performed or provide the Bo s. If the operation results in a ment Notices shall be filed only	osurface locations and mea and No. on file with BLM a multiple completion or re	sured and true vertica I/BIA Required subs ecompletion in a new	I depths of all pert equent reports shall interval, a Form 31	inent markers and zones be filed within 30 days 60-4 shall be filed once	
ขึ้ (i		REC	ENED	
				SEP 2	7 200/	
		-		Bureau of Lan Farmington	d Managemen. Field Office	
14. Thereby certify that the foregoing is true a	nd correct	1				
Name (Printed/Typed) Amy Mackey /		Title	Title Administrative Manager			
Signature Mu Colle		Date	Date September 26, 2007			
THIS SPACE FOR FEDERAL OR STATE USE						
Approved by		Title		Date		
Conditions of annoyal if any are attached Ann	vioual of this notice does not w	arrant or Office		9 S 4 5 5		

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 representations as to any matter within its jurisdiction. FARMINGTON FIELD OFFICE

Office

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.