Form 3160-5 (August 2007)

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

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FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

AUG 2 7 20 50 Lease Serial No. NMNM100305

RCVD AUG 29'08

SUNDRY	NOTICES AND	REPORTS	ON WELLS	,,,,,

6. If Indian, Allottee or Tribe Name

abandoned well.	Use Form 3160-3 (A	(PD) for su	ch própốŝä	iston Field	Office	UII,	DIST. 3
	T IN TRIPLICATE - Other				7. If Unit of CA/Agr	eamant,	Name and/or No.
1. Type of Well Oil Well Gas Well Other			8. Well Name and No. Pinon 35-44				
2. Name of Operator Maralex Resources, Inc.		-			9. API Well No. 30-045-32944		
3a. Address P.O. Box 338		3b. Phone No	. (include area co	xde)	10. Field and Pool of	•	atory Area
Ignacio, CO 81137		970/563-400	0		Basin Fruitland Co	al	
4. Location of Well (Footage, Sec., T.,) 1200 FSL; 1050 FEL (SESE) Section 35-T25N-R11W	R.,M., or Survey Description)			 Country or Parish San Juan County, 		
EL 12. CHEC	K THE APPROPRIATE BO	X(ES) TO INE	ICATE NATUR	E OF NOTIC	E, REPORT OR OT	HER D	ATA
TYPE OF SUBMISSION			TY	PE OF ACT	ON		
Notice of Intent	Acidize	Docq		\equiv	iction (Start/Resume)	Ę	Water Shut-Off
	Alter Casing	\equiv	ure Treat		mation	ہے ۔	Well Integrity
Subsequent Report	Casing Repair	_	Construction	∐ Recon	nplete	L.	Other Set Production
	Change Plans	L Plug	and Abandon	L Temp	orarily Abandon		Casing
Final Abandonment Notice	Convert to Injection	Plug	Back	Water	Disposal		
Total depth of 12-1/4" hole 137' read On 8/19/08, set 41 joints of 5-1/2", 1 5# gilsonite, 1/4# superflake, mixed 31 BBIs cement back to surfaces/ Dis	7#, J-55 blue band produc at 12.4 ppg. Tail cement splace with 39 BBIs fresh	ction casing se 100 sacks Sta	t at 1731!. O	Cement casir cement, 5# o	ng with 200 sacks k gilsonite, 1/4# supe	ead cer rflake,	ment, 65/35 pozmix, 6% gel, mixed at 15.2 ppg. Circulate
Pressure test on next	sundry				4		
-	-			***			
•	-				-		
-	-			-		-	ACCEPTED FOR RECORD
			-	-	-		AUG 27 2008 -
Report Rig Release	date		•	-	-	E	FARMINGTON FIELD OFFICE BY TL Salves
14. I hereby certify that the foregoing is tru	ic and correct. Name (Printed	(Typed)					
Carla S. Shaw	~	<u></u> -	Title Producti	on Technicia	an		·
Signature Odel Sthew		•	Date 08/20/20)08 -			
•	THIS SPACE I	FOR FEDE	RAL OR ST	ATE OFF	ICE USE		
Approved by						Ī	
~_			Title -			Date	
conditions of approval, if any, are attached that the applicant holds legal or equitable tit ntitle the applicant to conduct operations the	le to those rights in the subject						
Title 1811 S.C. Section 1001 and Title 431	IS C Section 1212 make it a	crime for any ne	man knowingly s	ad willfully to	make to any department		angulation I laited States any false

(Instructions on page 2)

fictitious or fraudulent statements or representations as to any matter within its jurisdiction.