

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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	JAN 27 2010	5. Lease Serial No. NMSF078584
2. Name of Operator McElvain Oil & Gas Properties, Inc.	Bureau of Land Management	6. If Indian, Allottee or Tribe Name
3a. Address 1050 17th St., Suite 1800 Denver, CO 80265	3b. Phone No. (include area code) 303-893-0933	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL - 660' FWL, Sec 13 T24N R7W NMPM		8. Well Name and No. Miller A #1E
		9. API Well No. 30-039-30594
		10. Field and Pool, or Exploratory Area Basin Dakota
		11. County or Parish, State Rio Arriba, 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"/> Recomplete	<input checked="" type="checkbox"/> Other Set Csg
	<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 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 recomplate 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 recomplate 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.)

12/3/2009 Pressure test Pipe and blind rams, choke and valves; 250 psi low- 5 minutes and 3000 psi high -10 minutes. Pressure tested Csg @ 600 psi for 15 minutes- test good. ✓ SEE BELOW

12/5-17/2009 Continue drilling to 6745' TD. With a 6.25" Bit ✓

12/19/2009 Circulate Csg: just above DV tool (4201'). Ran 149 Jts new 4 1/2 11.6# LTC N80- K55. Set @ 6732'. Cemented as follows:
Stage 1.
Lead: 165 sx Prem Class G, 5lbm gilsonite, w/ poly flake, 11.8 ppg, 2.54 Y.
Tail: 355 sx POZ 50/50, 5lbm gilsonite, w/ poly flake, 13.5 ppg, 1.3 Y.
60 bbls to surface. ✓

Stage 2
Lead: 535 sx, Class G 5 lbm gilsonite, w/ poly flake, 11.8 ppg, 2.54 Y.
Tail: 50 sx Poz 50/50, 5 lbm gilsonite, w/ poly flake, 13.5 ppg, 1.3 Y.
90 bbls to surface. ✓

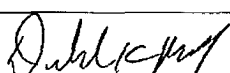
Clean pits, nipple down. Pressure test will be run prior to completion. ✓

12/20/2009 Released Rig @ 6:00 AM. ✓

RCVD FEB 2 '10
OIL CONS. DIV.

DIST. 3

REVIEW NMOCD RULE 19.15.16.10.I - CASING TESTS ARE TO BE CONDUCTED FOR 30 MINUTES.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Deborah Powell	Title Eng Tech Supervisor
Signature 	Date 01/22/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ 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.	Title _____ Office _____	Date _____
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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)

NMOCD

ACCEPTED FOR RECORD
JAN 27 2010
FARMINGTON FIELD OFFICE
BY 