Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

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Alter Casing Fracture Treat Reclamar Subsequent Report Casing Repair New Construction Recompl	on (Start/Resume)
SUBMIT IN TRIPLICATE — Other instructions on reverse side Type of Well X Oil Well	8. Well Name and No. Federal 34 No. 43 9. API Well No. 30-045-24521 10. Field and Pool, or Exploratory Area Lybrook Gallup 11. County or Parish, State San Juan DATA On (Start/Resume)
Name of Operator **Ridge Resources, Inc.** **Address** **D Box 189, Farmington, NM 87499* **Location of Well (Footage, Sec., T., R., M., or Survey Description)* **GO' FSL& 940' FEL. Sec. 34-T24N-R8W* **CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER TYPE OF SUBMISSION **TYPE OF SUBMISSION** TYPE OF ACTION* **Addize** Deepen	Federal 34 No. 43 9. API Well No. 30-045-24521 10. Field and Pool, or Exploratory Area Lybrook Gallup 11. County or Parish, State San Juan DATA DATA On (Start/Resume)
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I hereby certify that the foregoing is true and correct Name (Printed/Typed) Title	
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Signature Date Dec	ember 12, 2001
THIS SPACE FOR FEDERAL OR STATE USE	
170	Date
proved by	
nditions of approval, if any, are attached. Approval of this notice does not warrant or office tify that the applicant holds legal or equitable title to those rights in the subject lease ich would entitle the applicant to conduct operations thereon.	OR RECOR!
le 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agence	in M.OOIT

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