

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004

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
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Roddy Production Company, Inc.

3a. Address
P.O. Box 2221, Farmington, NM 87499

3b. Phone No. (include area code)
505-325-5750

4. Location of Well (Footage, Sec., T, R., M., or Survey Description)
Surface Location: 1765' E x 790' FWL, Section 21, T28N, R11W

5. Lease Serial No.

NM-10063 NM 010063

6. If Indian, Allottee or Tribe Name

N/A

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Lucerne 4

9. API Well No.

30-045-29162

10. Field and Pool, or Exploratory Area

Kutz Picture Cliffs/ Fruitland Coa

11. County or Parish, State

San Juan County, New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 type="checkbox"/> Other Work Over
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Operations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

3. 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 recomplete 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 recompletion 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.)

Downhole commingle the Basin Fruitland Coal and the West Kutz-Picture Cliffs. Fruitland Coal perforation intervals as follows: 1716'-1713', 1682'-1686', 1677'-1679', 1644'-1611', 1583'-1590', 1577', 1549', 1543', 1534'-1536', 1518'-1520', 1482', 1463'-1465', and 1438' at 4jpsf. Existing Picture Cliffs perforation interval as follows: 1721'-1767' at 4jpsf. Allocation method and supporting data: Subtract historic PC production (from decline curve) from total production to allocate Fruitland Coal production. The commingling will not reduce the value of the total remaining reserves. This operation will include the construction of a earthen unlined blow pit and a work over pit. Pits will be closed per NMOCD guide lines. Estimated start date is July 10, 2004

CONDITIONS OF APPROVAL
Adhere to previously issued stipulations.

DHC 1550A Z

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Robert R. Griffiee

Title Operation Manager

Signature

Date 07/07/04

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

/s/ Joe Hewitt

Name

(Printed/Typed) JOE HEWITT

Title

Acting

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.

Office

FF0

Date

8-5-14

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.

(Continued on next page)

NMOCD

District I
1625 N. French Dr., Hobbs, NM 88240

District II
811 South First, Artesia, NM 88210

District III
1000 Rio Brazos Rd., Aztec, NM 87410

District IV
2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

OIL CONSERVATION DIVISION
2040 South Pacheco
Santa Fe, NM 87505

Form C-102
Revised March 17, 1999

Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

2001 JUL 28 PM 2 54

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

¹ API Number 30-045-29162	² Pool Code 71629	³ Pool Name Basin Fruitland Coal
⁴ Property Code 13929	⁵ Property Name Lucerne Federal	⁶ Well Number 4
⁷ OGRID No. 36845	⁸ Operator Name Roddy Production Inc.	⁹ Elevation 5781

¹⁰ Surface Location

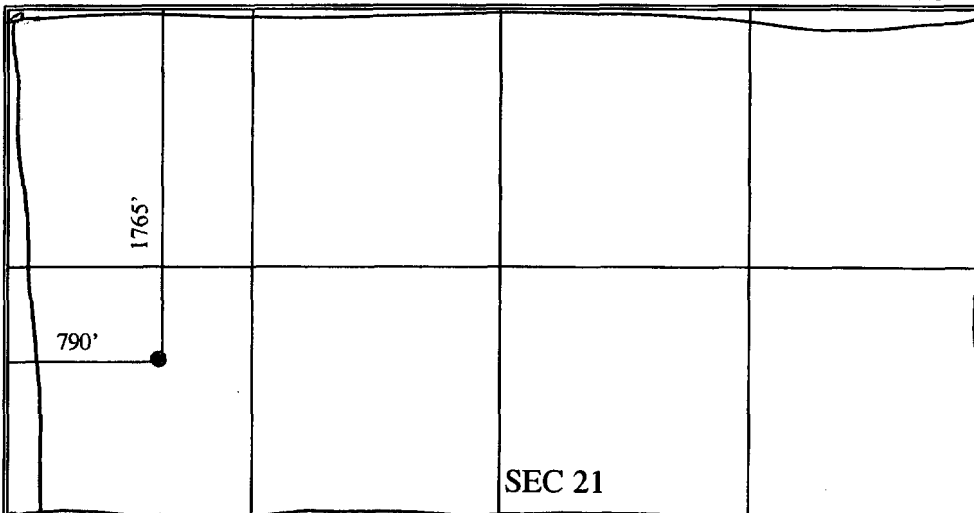
UL or lot no. E	Section 21	Township T28 N	Range R11W	Lot Idn	Feet from the 1765	North/South line FLN	Feet from the 790	East/West line FWL	County San Juan
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¹¹ Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
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¹² Dedicated Acres 300 N/2	¹³ Joint or Infill I	¹⁴ Consolidation Code	¹⁵ Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A
NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

				<p>¹⁷ OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief</p> <p>Signature <u>Robert R. Griffie</u></p> <p>Printed Name <u>Robert R. Griffie</u></p> <p>Title <u>Operation Manager</u></p> <p>Date <u>07/26/2004</u></p>
<p>¹⁸ SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.</p> <p>Note: See Original C-102 dated 07/05/94</p> <p>Signature and Seal of Professional Surveyor:</p> <p>Certificate Number</p>				