Form 3160-5 (September 2001)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT RECEIVED

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

	BUREAU OF LAND MAI	NAGEMENTRED	FIVEII /	5. Lease	Serial	No.	
SUNDRY NOTICES AND REPORTS ON WELL SA Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.			MDA 70	MDA 701-98-0013 Tract 4			
					ottee or Tribe Name		
apangonea w	ell. Use Form 3160-3 (Al	tor such prop) (ער ה TO CED (ער	osais. O Amilo, i.i.	1			
			3 AM 10: 44	Jicarilla			
SUBMITINATE	NelliGATTE - Othis Unis	dinaliani astronov		7. If Unit	or CA	'Agreement, Name and/or No.	
1. Type of Well		i de al granda en agran. Orioso des	The section of the section of	33420			
Oil Well Gas Well	Other	1 de de tel de la cuesta en	<u> </u>	8. Well N	lame a	nd No.	
2. Name of Operator	ABOVE AND LINES OF		The first of the second se	Jicarilla	<u> 29-02</u>	-18 No. 3	
Mallon Oil Co., an indirect whol	ly-owned subsidiary of Blac	k Hills E & P, Inc.		9. API W	ell No	•	
3a. Address	•	3b. Phone No. (in	clude area code)	30-039-	27594		
350 Indiana Street, Suite 400 Go	olden, CO, 80401	720-210-1308	10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)				La Jara		Canyon, Tertiary	
1740' FSL & 2140' FEL (NWSW		•		11. Count	y or Pa	rish, State	
Sec. 18, T29N-R02W							
				Rio Arri	ba, Ni	M	
12. CHECK AP	PROPRIATE BOX(ES) 1	O INDICATE NA	TURE OF NOTICE,	REPORT, C	OR O	THER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION			•	
	Acidize	Deepen Deepen	Production (Sta	art/Resume)	П	Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	a v resume)	H	Well Integrity	
Subsequent Report	Casing Repair	New Constructi			Ø	Other	
Final Abandonment Notice	Change Plans	Plug and Aband					
Final Adangonment Notice	Convert to Injection	Plug Back	Water Disposal	ŀ			
determined that the sile is ready  Mallon Oil Company, an indirect  La Jara Canyon, Tertiary formation	wholly-owned subsidiary of	f Black Hills Explora	tion & Production, Inc. h				
			STATE OF THE PARTY	10.33			
14. I hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct				· · · · · · · · · · · · · · · · · · ·		
Allison Newcomb		Title	Engineering Technician				
Signature Allison	x Mewcon	mb Date	<sup>2</sup> 9/1/2004				
					BARDSCHE CH		
Approved by (Signature)	THIS SPACE	FORFEDERALO					
	/s/ David R. Sitz	FORTEDERALS er	RSTATE OFFICE US  Name (Printed/Typed)		ηταί	Multi-Resources	
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to continue th	/s/ David R. Sitz	ice does not warrant o	RSTALEIOFFICEUS  Name (Printed/Typed)  Office		ητωί	Multi-Resources  Date SEP 2 7 2004	

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.