## DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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.

LOVIN VILVOAE	υ
OMB No. 1004-013	35
Expires: January 31,	2004

	Lease	Serial	Nο
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Jicarilla Apache Tribe			
7. If Unit or CA/Agreement,	Name	and/or	No

SUBMIT IN TRIPLICATE - Other instructions on reverse side					7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well 2014 NOU 22 PM 5 31							And the second of the second o	
Oil Well  Gas Well  Other						8. Well Name and No.		
2. Name of Operator	ing garager and the state of the second of t	- TA	CULIVED GURDOTONIA			Jicarilla 29	9-03-	11 No. 3
Black Hills Gas Resources, Inc.	0.10	FA	RMINGTON 11)	Marie d	Etherby Nouth C	9. API We	li No	
3a. Address		3	b. Phone No. (include	area	code)	30-039-27847		
350 Indiana Street, Suite 400 Go	olden, CO 80401	72	20-210-1308			10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T, R., M., or Survey Description) 450' FNL & 860' FWL (NWNW) Unit D Sec. 11, T29N-R03W					East Blanco, Pictured Cliffs 11. County or Parish, State			
						Rio Arrib		
12. CHECK AP	PROPRIATE BOX(ES) TO	) IN	DICATE NATUR	E O	F NOTICE, RE	PORT, OF	₹ OT	THER DATA
TYPE OF SUBMISSION			TYI	E O	F ACTION			
If the proposal is to deepen direct Attach the Bond under which the following completion of the inv	•	ly, gi vide resu file oduc	ve subsurface locations the Bond No. on file w tts in a multiple complet d only after all require tion casing set at 37	s and ith B etion ments	measured and true LM/BIA. Required or recompletion in s, including reclam on 8/5/2004. Cem	y proposed w vertical depti d subsequent a new interv ation, have b	hs of a repor al, a F been c	all pertinent markers and zones. ts shall be filed within 30 days Form 3160-4 shall be filed once ompleted, and the operator has
A TD of 3800' was reached on 8/ Pressure test casing on 11/15/200	75/2004.	01	<del>IFIDENT</del> IA		Contraction of the contraction o	456) 41,205		17 17 13 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1

14. I hereby certify that the foregoing is true and correct Name (PrintedlTyped)	
Allison Newcomb	Title Engineering Technician
Signature allison Newcomb	Date 11/16/2004
THIS SPACE FOR FEDER	AL OR STATE OFFICE USE

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.

/s/ David R. Sitzler

Name Division of Multi-Resources (Printed/Typed) Office

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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.

Approved by (Signature)