

RECEIVED

UNITED STATES

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

~~Do not use this form for proposals to drill or reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.~~

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. ☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Elm Ridge Exploration Co LLC

3a. Address
P.O. Box 156, Bloomfield, NM 87413

3b. Phone No. (include area code)
(505) 632-3476 ext. 203

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
790' FNL X 1850' FWL Sec. 9-T23N-R4W
NE/NW "C" Sec. 9-T23N-R4W

5. Lease Serial No.
Contract 71

6. If Indian, Allottee or Tribe Name
Jicarilla

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

8. Well Name and No
Cinco Diablos #2Y

9. API Well No.
30-039-20180

10. Field and Pool, or Exploratory Area
Ballard Pictured Cliffs

11. County or Parish, State
Rio Arriba County, NM

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 checked="" type="checkbox"/> Other Operator Change
	<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 Operations (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 recomple 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.)

Effective May 1st, 2004, operations of the above well were transferred from Rio Chama Petroleum, Inc. to Elm Ridge Exploration CO LLC Bond coverage pursuant to 43 CFR 3104 for lease activities is being provided by Elm Ridge Exploration Co LLC under its nationwide bond, BIA Bond # OKC606114 Elm Ridge Exploration Co LLC will be responsible for compliance under the terms and conditions of the lease



14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) Amy Mackey Title Administrative Manager

Signature [Signature] Date August 29, 2011

THIS SPACE FOR FEDERAL OR STATE USE

Approved by Title Date

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

Title 18 U.S.C. Section 1001, makes 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 reverse)

ACCEPTED FOR RECORD

AUG 30 2011

FARMINGTON FIELD OFFICE
BY [Signature]

NMOCD