

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

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

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1.
<input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other
2. Name of Operator
Elm Ridge Resources, Inc.
3a. Address
P.O. Box 189, Farmington, NM 87499
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

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 Chan
	<input type="checkbox"/> Change Plans <input checked="" type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon <input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Convert to Injection <input type="checkbox"/> Plug Back

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 recompleat 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 recompleat 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.)

Elm Ridge Resources, Inc did an MIT on the above referenced well on 3-28-05. The test failed so we plan to P & A this well
The procedure will be forthcoming.

14. I hereby certify that the foregoing is true and correct		
Name (Printed/Typed)	Title	
Amy Mackey	Production Assistant	
Signature	Date	
<i>Amy Mackey</i>	April 6, 2005	
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

APR 13 2005

NMOC

FARMINGTON FIELD OFFICE
BY *Sm*



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

MECHANICAL INTEGRITY TEST REPORT (TA OR UIC)

Date of Test 3-28-05 Operator Elm Ridge API # 30-0 39 20180

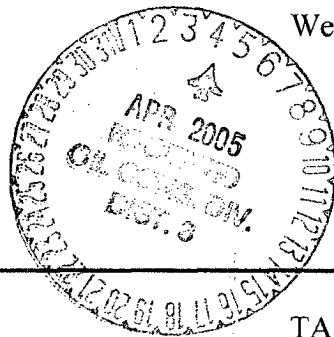
Property Name CINCO DIABLOS Well # 2-Y Location: Unit 9C Sec 23 Twn 23 Rge 44

Land Type:

State _____
Federal _____
Private _____
Indian X

Well Type:

Water Injection _____
Salt Water Disposal _____
Gas Injection _____
Producing Oil/Gas X
Pressure observation _____



Temporarily Abandoned Well (Y/N): _____ TA Expires: _____

Casing Pres. 0 Tbg. SI Pres. _____ Max. Inj. Pres. _____
Bradenhead Pres. 0 Tbg. Inj. Pres. _____
Tubing Pres. 0
Int. Casing Pres. 0

Pressured annulus up to 550 psi. for 10 mins. Test passed failed

REMARKS: pumped 5.9 BBL per min. didn't hold pressure went on UAC
TOOK about 12 BBLs TO Load Hole

By Lon Howard
(Operator Representative)

Witness

Handwritten signature
(NMOCD)

Company man
(Position)

Schedule
Relat
1A
le PA

Revised 02-11-02

