

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 #398

6. If Indian, Allottee or Tribe Name

Jicarilla Apache

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

8. Well Name and No.

Martin Whittaker #34

9. API Well No.

30-039-23440

10. Field and Pool, or Exploratory Area

S. Lindrith Gallup Dkta ext.

11. County or Parish, State

Rio Arriba County, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1.

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Elm Ridge Resources, Inc.

3a. Address

PO Box 156 Bloomfield, NM 87413

3b. Phone No., (include area code)

505-632-3476 x 201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

O- Sec. 16-T23N-R4W

990 FSL X 1650 FEL

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
	<input type="checkbox"/> Change Plans	<input checked="" 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 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 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.)

Elm Ridge Resources, Inc did an MIT test on the above referenced well on 4-1-05. The test failed and we plan to P & A this well. The procedure will be forthcoming.

RECEIVED
FARMINGTON NM
APR 7 PM 12 34

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

Name (Printed/Typed)

Amy Mackey

Title

Production Assistant

Signature

Date

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

FARMINGTON FIELD OFFICE
BY Sun

NMOCD



NEW MEXICO ENERGY, MINERALS and NATURAL RESOURCES DEPARTMENT

MECHANICAL INTEGRITY TEST REPORT (TA OR UIC)

Date of Test April 1 - 2005 Operator Elm Ridge Resources Inc. API # 30-039-23440

Property Name Martin Whittaker Well # 34 Location: Unit 0 Sec 16 Twn 23 Rge 4

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): Y TA Expires: _____

Casing Pres. 5 PSI Tbg. SI Pres. _____ Max. Inj. Pres. _____
Bradenhead Pres. 0 Tbg. Inj. Pres. _____
Tubing Pres. 0
Int. Casing Pres. _____

Pressured annulus up to 540 psi. for 10 mins. Test passed failed

REMARKS: STARTED TEST @ 8:45 AM. PRESSURED UP CASING
TO 540 PSI. AFTER 10 MIN'S PRESSURE WAS 445 PSI. END
TEST AFTER 10 MIN.

By RICHARD GRAVES
(Operator Representative)

Witness [Signature] OCD
(NMOCD)

Production Foreman
(Position)

Revised 02-11-02

5 6 AM

7

8

9

10

11

NOON

1

2

3

4

5

Handwritten signature
TEST

GRAPHIC CONTROLS CORPORATION
BUFFALO, NEW YORK

CHART NO. MC MP-1000

METER *1000 Pound/force*

April 11-2005
CHART PUT ON
8:45 A.M.

April 11-2005
TAKEN OFF
8:55 A.M.

LOCATION *Martin Whittaker 34*

REMARKS *MIT*
TEST FAILED

