Form 3160-5 (September 2001)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

SUNDRY NOTICES AND REPORTS ON WELLS

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

| MD. | A ' | 701 | -98 | 00-2 | 13 |
|-----|-----|-----|-----|------|----|
|     |     |     |     |      |    |

| Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. |                              |   |                                   |  | 6.                 | 6. If Indian, Allottee or Tribe Name        |   |           |                               |                             |
|---|------------------------------|---|-----------------------------------|--|--------------------|---|---|-----------|-------------------------------|-----------------------------|
| abandonea we  | OS                           |   | ,                                 |  |                    |   | icarilla Ar   | ache      | Tribe                         |                             |
| SUBMIT IN TR  | IPLIC                        | CATE - Other instru   | ıcti                              | ons on revers                          | se side            | 7.  | . If Unit or  | CA/       | Agreement, Na                 | me and/or No.               |
| 1. Type of Well   |                              |   |                                   | REC                                    | )EIVE              | <u> </u>                                    |   |           |                               |                             |
| Oil Well Gas Well Other   |                              |   |                                   | _ 010 FAR                              | 8                  | 8. Well Name and No.                        |   |           |                               |                             |
| 2. Name of Operator   |                              |   |                                   |  |                    |   | icarilla 28   |           |                               |                             |
| Black Hills Gas Resources, Inc.   |                              |   | T 21                              | h Dhana Na <i>G</i> irah               |                    |   | . API Wel   |           |                               |                             |
| 3a. Address   |                              |   | 3b. Phone No. (include area code) |  |                    |   | 30-039-29319  10. Field and Pool, or Exploratory Area |           |                               |                             |
| 350 Indiana Street, Suite 400 Go  |                              |   |                                   | 20-210-1308                            |                    | Burro Canyon, Tertiary                      |   |           |                               |                             |
| 4. Location of Well (Footage, Sec., T, R., M., or Survey Description) Sec. 9, T28N-R02W 1870' FNL & 1995' FEL (SWNE)    |                              |   |                                   |  | 1                  | 11. County or Parish, State  Rio Arriba, NM |   |           |                               |                             |
| 12. CHECK AP  | PROP                         | RIATE BOX(ES) TO  | ) IN                              | DICATE NAT                             | URE O              |   |   |           |                               | 4                           |
| TYPE OF SUBMISSION  |                              |   |                                   |  | ГҮРЕ О             | F ACTION                                    |   |           |                               |                             |
| ✓ Notice of Intent  |                              | Acidize<br>Alter Casing   |                                   | Deepen<br>Fracture Treat               |                    | Production (Start/Re<br>Reclamation         | sume)   |           | Water Shut-Oil Well Integrity |                             |
| Subsequent Report   | 닉                            | Casing Repair   | 밁                                 | New Construction                       | =                  | Recomplete                                  |   | $\square$ | Other Forma                   | lion                        |
| Final Abandonment Notice  |                              | Change Plans Convert to Injection   | 5                                 | Plug and Abandor<br>Plug Back          | ָ<br>ה             | Temporarily Abando<br>Water Disposal        | on  |           | Completion                    |                             |
| testing has been completed. Fin determined that the site is ready  Black Hills Gas Resources, Inc. i                    | for fina                     | al inspection.)   |                                   |  |                    |   | mation.   | 070 FARS  | 7905 MAY 16 PM 1 31           |                             |
| 14. 1 hereby certify that the foregoir Name (PrintedlTyped)   | g is tru                     | e and correct   |                                   |  |                    |   |   |           |                               |                             |
| Allison Newcomb   |                              |   |                                   | Title F                                | Engineer           | ing Technician                              |   |           |                               |                             |
| Signature AllWIX  | اب ر                         | 1 Juvemb  |                                   | Date                                   | 5/10/200           | 5   |   |           |                               |                             |
|   |                              | THIS SPACE F  | 1 (5 ,70)                         |  | STATE              | OFFICE USE                                  |   |           |                               | e Diskrijanska<br>President |
| Approved by (Signature)   |                              | /s/ Adrienne  | Bru                               | umley                                  | Name<br>(Printed/T | yped) .                                     |   | Title     | ;                             |                             |
| Conditions of approval, if any, are certify that the applicant holds leg, which would entitle the applicant to          | attach<br>al or ec<br>conduc | ed. Approval of this notic<br>quitable title to those righ<br>t operations thereon. | e do<br>ts in                     | es not warrant or<br>the subject lease | Office             | FFO   |   |           | Date 5/3                      | 31/05                       |

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.