

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
Black Hills Gas Resources, Inc.

3a. Address  
350 Indiana Street, Suite 400 Golden, CO 80401

3b. Phone No. (include area code)  
720-210-1308

4. Location of Well (Footage, Sec., T. R., M., or Survey Description)  
1800' FNL & 745' FWL (SWNW) Unit E  
Sec. 3, T29N-R03W

5. Lease Serial No.  
Jicarilla Contract 451

6. If Indian, Allottee or Tribe Name  
Jicarilla Apache Tribe

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

8. Well Name and No.  
Jicarilla 451-03 No. 21

9. API Well No.  
30-039-29267

10. Field and Pool, or Exploratory Area  
Cabresto Canyon, Tertiary

11. County or Parish, State  
Rio Arriba, 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 Formation Completion
	<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	

3. Describe Proposed or Completed Operation (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.)

Black Hills Gas Resources, Inc. intends to complete the above referenced well in the Cabresto Canyon, Tertiary formation.



*IN THE FUTURE, PLEASE SUBMIT YOUR CD2 TO THE FFO, PRIOR TO COMPLETING INTERVAL.*

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Allison Newcomb

Title Engineering Technician

Signature

*Allison Newcomb*

Date 5/6/2005

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature)

Name  
(Printed/Typed)

Title

Office

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.

ACCEPTED FOR RECORD

JUL 11 2005

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 any statement or representation to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

FARMINGTON FIELD OFFICE  
BY *[Signature]*

(Continued on next page)

NMOCD

DISTRICT II  
South First, Artesia, N.M. 88210

DISTRICT III  
1000 Rio Brazos Rd., Aztec, N.M. 87410

DISTRICT IV  
2040 South Pacheco, Santa Fe, NM 87505

OIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505

Submit to Appropriate District Office  
State Lease - 4 Copies  
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

*API Number 30-039-29267	*Pool Code 97037	*Pool Name Cabresto Canyon, Tertiary
*Property Code 24245	*Property Name JICARILLA 451-03	*Well Number 21
*OGRID No. 013925	*Operator Name Black Hills Gas Resources, Inc.	*Elevation 7145'

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
E	3	29-N	3-W		1800	NORTH	745	WEST	RIO ARRIBA

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
*Dedicated Acres 460154.44					*Joint or Infill		*Consolidation Code		*Order No.

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED  
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

<p>16</p> <p>S 89-59-12 W 2608.25' (C) FD MARKED STONE N 89-34-24 E 211.26' CALC'D COR. CLOSING COR. FD 2 1/2" BC GLO 1917</p> <p>LOT 4</p> <p>1800'</p> <p>745'</p> <p>S 00-04-51 W 5191.62' (M)</p> <p>LAT.=36-45-22 N. (NAD 83) LONG.=107-08-41 W (NAD 83)</p> <p>FD. 2 1/2" BC 1917 GLO</p>	<p>17</p> <p>OPERATOR CERTIFICATION</p> <p>I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.</p> <p><i>Allison Newcomb</i> Signature</p> <p>Allison Newcomb Printed Name</p> <p>Engineering Technician Title</p> <p>May 6, 2005 Date</p>
<p>18</p> <p>SURVEYOR CERTIFICATION</p> <p>I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision and that the same is true and correct to the best of my knowledge and belief.</p> <p><i>Michael Vukobratovic</i> Signature</p> <p>14831 Certificate Number</p>	<p>19</p> <p>REGISTERED PROFESSIONAL SURVEYOR</p> <p>14831</p>