Form 3160-5 (September 2001)

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

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

5. Lease Serial No. SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

JIC109

6. If Indian, Allottee or Tribe Name

abandoned we	O. II IIIGIGI	, Thronce of The Ivallic				
ubandonoa W	sn. 0001 01111 0100 0 (Fil D)	2003	' 6110 GB 513	Gicarilla A	pache Tribe	
SUBMIT IN TR	RIPLICATE - Other Instruc	ctions on reverse	side <u>NEGERE</u>	7. If Unit of	r CA/Agreement, Name and/or N	lo.
1. Type of Well		(	70 FARMINGT			
Oil Well Gas Well	Other			8. Well Na	me and No.	
2. Name of Operator				Jicarilla B	3 #2	
CDX Rio, LLC				9. API We	ll No.	
Ba. Address		3b. Phone No. (include area code)		30-039-08	8135	
2010 Afton Place, Farmington, NM 87401		505-326-6639		10. Field ar	nd Pool, or Exploratory Area	
Location of Well (Footage, Sec.,					MesaVerde	
SWSW Sec. 16, T26N, R5W, N		11. Cour			or Parish, State	
				Rio Arrib	a, New Mexico	
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATUR	RE OF NOTICE, RI	EPORT, OF	R OTHER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION			
	Acidize	Deepen	☑ Production (Start	/Resume)	Water Shut-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete		Other	
Subsequent Report	Change Plans	Plug and Abandon	Temporarily Aba	ındon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	Water Disposal		
If the proposal is to deepen direct Attach the Bond under which the following completion of the investment of the invest	•	give subsurface location te the Bond No. on file v sults in a multiple comp iled only after all require	s and measured and true vith BLM/BIA. Require etion or recompletion in	vertical depth d subsequent a new interv	hs of all pertinent markers and zo reports shall be filed within 30 cal, a Form 3160-4 shall be filed of	nes. lays nce
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14. I hereby certify that the foregoing is true and correct Name (PrintedlTyped)				
Enid Grubb	Title Production Accounting Specialist			
Signature A. H. S.	Date A	ugust 26, 2005		
THIS SPACE FOR FEDERA	LOR	STATE OFFICE USE	AGGEPTED FOR NEGON	U
Approved by (Signature)		Name (Printed/Typed)	Title AUG 2 9 2005	
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	FARMINGTON FIELD OFFICE BY	=

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.