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 S	erial N	10.		
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.					Jic 464 6. If Indian, Alloree or Tribe Name				
					Jicarilla Apache				
SUBMIT IN TR	IPLICATE = Other instru	ctions on r	everse side	9			Agreement, Name	and/or No.	
. Type of Well						N/A			
Oil Well Gas Well Other					8. Well Name and No.				
2. Name of Operator Black Hills Gas Resources, Inc.						Jicarilla 464-32 No. 11 9. API Well No.			
a. Address  3b. Phone No. (include area code)					30-039-25762				
	720-210-1300			10. Field and Pool, or Exploratory Area					
50 Indiana St., Suite 400, Golden, CO 80401 [720-210-1300]  Location of Well (Footage, Sec., T, R., M., or Survey Description)  190' FNL and 1850' FWL (NWNE) Unit B  ec. 32, T30N-R03W					EB, PC; Cabresto Cyn; Tertiary  11. County or Parish, State  Rio Arriba, NM				
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE	NATURE O	F NOTICE, R					
TYPE OF SUBMISSION									
<ul><li>✓ Notice of Intent</li><li>✓ Subsequent Report</li><li>✓ Final Abandonment Notice</li></ul>	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Tr New Const Plug and A Plug Back	ruction 💆	Production (Start Reclamation Recomplete Temporarily Abs Water Disposal		=	Water Shut-Off Well Integrity Other		
If the proposal is to deepen dire Attach the Bond under which the	ntends to recomplete the above i	v, give subsurfactide the Bond No results in a mult filed only after	ce locations and o on file with E iple completion all requirement	measured and true BLM/BIA. Require or recompletion is, including reclar	e vertical dep ed subsequer n a new inter mation, have	oths of a at repor rval, a F been co	all pertinent markets shall be filed worm 3160-4 shall ompleted, and the	ers and zones within 30 day be filed once operator ha	
				ANTALEST TO THE PARTY OF THE PA	SEP SECENT COMS DIST.	2005 (SON) (SON)	A STATE OF THE STA		
I hereby certify that the foregoin Name (PrintedlTyped)	ng is true and correct				<del></del>	<del>-</del>			
Allison Newcomb	Title Engineering Technician								
Signature Signature	Mus mb		Date 0/14/200	.5					

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature) Original Signed: Stephen Mason

Name. (Printed/Typed)

Title

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

SEP 2 3 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 to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.