

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.

RECEIVED

JAN 20 2015

FORM APPROVED  
OMB No. 1004-0135  
Expires July 31, 1996

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

1.  Oil Well  Gas Well  Other **\*REVISED\***

2. Name of Operator  
ELM RIDGE EXPLORATION CO LLC

3a. Address  
PO BOX 156 BLOOMFIELD NM 87413

3b. Phone No. (include area code)  
505-632-3476 EXT 201

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
SHL: "J" Sec.11-T22N-R3W 1972' FSL X 2055' FEL  
BHL: "N" Sec 11-T22N-R3W 660' FSL X 1980' FWL

5. Lease Serial No.  
BIA 360

6. Indian, Allottee or Tribe Name  
Jicarilla Apache

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

8. Well Name and No.  
Chacon Amigos 18

9. API Well No.  
30-043-21186

10. Field and Pool, or Exploratory Area  
Lindrith Gallup Dakota West

11. County or Parish, State  
Sandoval County, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION                                    | TYPE OF ACTION  |
|---|---|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize                              |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Deepen                               |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Alter Casing                         |
|   | <input type="checkbox"/> Fracture Treat                       |
|   | <input type="checkbox"/> Casing Repair                        |
|   | <input type="checkbox"/> New Construction                     |
|   | <input type="checkbox"/> Change Plans                         |
|   | <input type="checkbox"/> Plug and Abandon                     |
|   | <input type="checkbox"/> Convert to Injection                 |
|   | <input type="checkbox"/> Plug Back                            |
|   | <input type="checkbox"/> Production (Start/Resume)            |
|   | <input type="checkbox"/> Reclamation                          |
|   | <input type="checkbox"/> Recomplete                           |
|   | <input type="checkbox"/> Temporarily Abandon                  |
|   | <input type="checkbox"/> Water Shut-Off                       |
|   | <input type="checkbox"/> Well Integrity                       |
|   | <input checked="" type="checkbox"/> Other Spud Surface Casing |
|   | <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 recomplate 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 Exploration Co LLC spud the above referenced well on 12-21-14. On 12-22-14 we drilled a 12 1/4" hole to 576' and ran 11 joints of 8-5/8" 24# J-55 casing to 570'. We then pumped 417 sks of Premium Class G cement. Circulated 25 bbls of good cement to surface. Pressure tested casing to 600 PSI for 30 minutes. Test was good. Tested BOP to 2000 PSI for 10 minutes. ✓

ACCEPTED FOR RECORD  
JAN 22 2015  
FARMINGTON FIELD OFFICE  
BY: \_\_\_\_\_

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

Name (Printed/Typed) Amy Archuleta Title Sr. Regulatory Supervisor

Signature \_\_\_\_\_ Date January 20, 2015

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)

RECEIVED  
JAN 26 2015  
NMOCD  
DISTRICT III

NMOCD TV

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|   | <input type="checkbox"/> Production (Start/Resume)                   |
|   | <input type="checkbox"/> Reclamation                                 |
|   | <input type="checkbox"/> Recomplete                                  |
|   | <input type="checkbox"/> Temporarily Abandon                         |
|   | <input type="checkbox"/> Water Disposal                              |
|   | <input type="checkbox"/> Water Shut-Off                              |
|   | <input type="checkbox"/> Well Integrity                              |
|   | <input checked="" type="checkbox"/> Other <u>Spud Surface Casing</u> |

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**JAN 22 2015**  
FARMINGTON FIELD OFFICE  
BY: *[Signature]*

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

|   |   |
|---|---|
| Name (Printed/Typed)<br><b>Amy Arculeta</b> | Title<br><b>Sr. Regulatory Supervisor</b> |
| Signature<br><i>[Signature]</i>             | Date<br><b>December 23, 2014</b>          |

**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 |      |

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