

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

Duncan Oil, Inc.

3a. Address

1777 S Harrison, P-1, Denver CO 80210

3b. Phone No. (include area code)

(303) 759-3303

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

362' FNL - 1004' FEL

Sec. 12-T29N-R17W, NMPM

5. Lease Serial No.

14-20-0603-10010

6. If Indian, Allottee, or Tribe Name

Nayajo Tribal

7. If Unit or CA Agreement Designation

8. Well Name and No.

North Hogback 12 #4

9. API Well No.

30-045-21003

10. Field and Pool, or Exploratory Area

Slickrock Dakota

11. County or Parish, State

San Juan, NM

12. CHECK APPROPRIATE BOX(S) 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"/> Altering 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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	

13. Describe Proposed or Completed Operation (clearly state all pertinent details including estimated starting date of any proposed work and approximate duration of the work. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markings and sands. Attach the Bond under which the work will be performed or provide the Bond No. on file with the 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 Notice 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.)

Request permission to re-enter and replug and abandon the subject well. The well was P&A'd in October, 1994 but a recent report dated 11/4/05 from Envirotech, Inc. revealed that a small gas leak was observed around the dry hole marker. The expected 3-4 day procedure to replug the well follows:

- 1 MI Service Unit.
- 2 Nipple up BOPs.
- 3 Drill out cement in 5-1/2" casing to 250'.
- 4 Pressure test csg.
- 5 Re-fill 5-1/2" OD, 15.5#, 8 Rd ST&C casing from 250' to surface with 40 sx class "B" neat cement.
- 6 Re-install permanent dry hole monument.

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

Name (Printed/ Typed)

W. S. Fallin

Title

Production Manager

Signature

W. S. Fallin

Date

11/29/05

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Original Signed: Stephen Mason

Title

Date

DEC 02 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

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

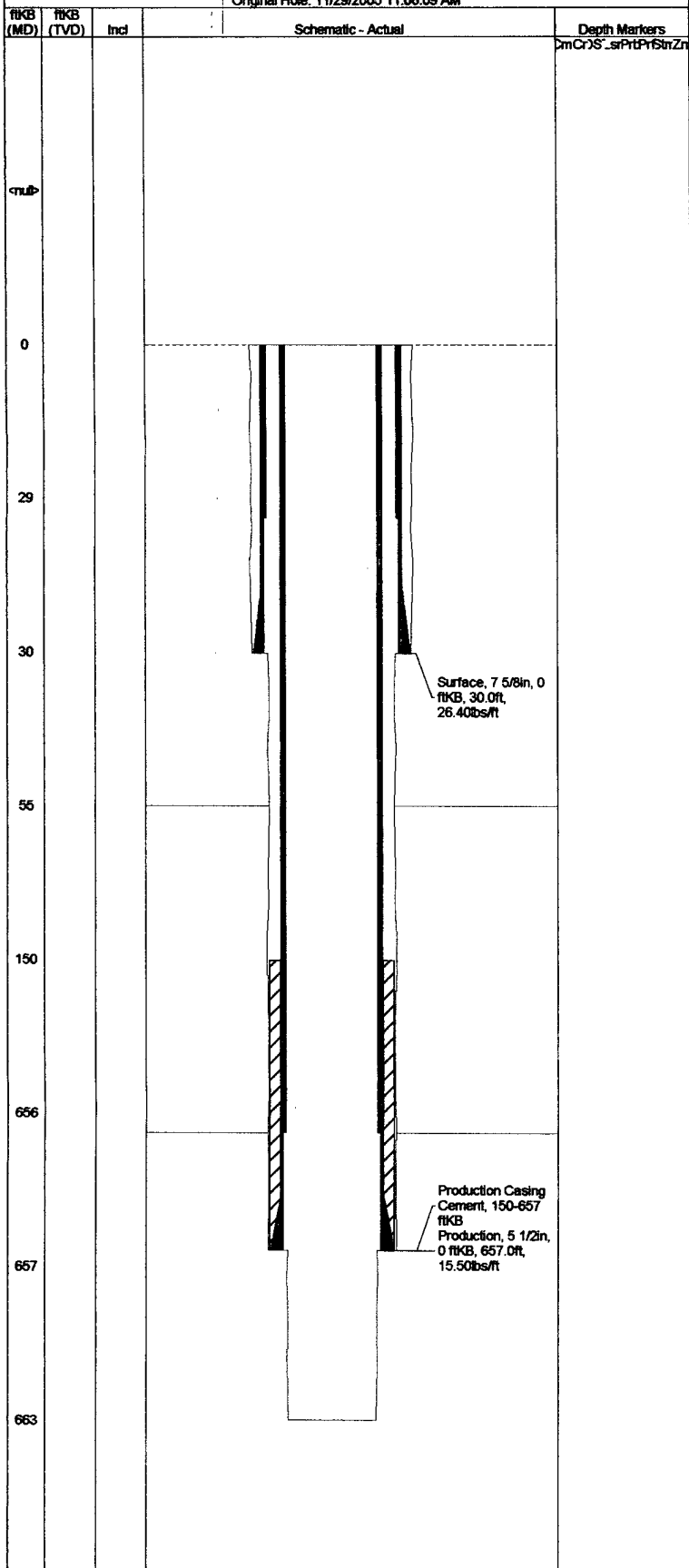
(Instructions on reverse)

NMOCD

Complete Well Summary

North Hogback 12 #4

Original Hole: 11/29/2005 11:06:09 AM



API/UWI		Operator Duncan Oil	
Original KB Elevation (ft)	KB-Ground Distance (ft)	Spud Date 8/25/1972	Rig Release Date 9/8/1972
Surface Legal Location Sec 12 T29N, R17W		Latitude (DMS) 0° 0' 0" N	Longitude (DMS) 0° 0' 0" E
Original Hole			
Wellbore API/UWI	Btm. Loc.	Profile Type	KO MD (ftKB)
Proposed Deviation Survey		Deviation Survey	
Size (in)		Act Top (ftKB)	Act Btm (ftKB)
8 1/2		0.0	30.0
6 3/4		30.0	657.0
4 3/4		657.0	663.0
PBTDs			
Date	Depth (ftKB)	Method	Comment
Formations			
Formation Name	Geologic Age	Element Type	H2S (%)
Dakota			
Gallup			
Deviation Surveys			
Date	Description	Prop?	Definitive?
		No	No
Reservoirs			
Reservoir Name	Depth Top (ftKB)	Depth Btm (ftKB)	Depth Res Datum (ft (SS))
Surface, 30.0 ftKB			
Run Date	Centralizers	Scratchers	Drift M...
OD (in)	Item Description	Btm (ftKB)	Jts
7 5/8	Casing Joints	29.0	
7 5/8	Shoe	30.0	
ID (in)			
6.989			
Wt (kips)			
0.8			
Grade			
J-55			
Top Thread			
Production, 657.0 ftKB			
Run Date	Centralizers	Scratchers	Drift M...
OD (in)	Item Description	Btm (ftKB)	Jts
5 1/2	Casing Joints	656.0	
5 1/2	Guide Shoe	657.0	
ID (in)			
4.950			
Wt (kips)			
10.2			
Grade			
J-55			
Top Thread			
Production Casing Cement, casing, <Start Date?>			
Cementing Company	Evaluation Method	Cement Evaluation Results	
Stg No.	Description	Top (ftKB)	Btm (ftKB)
	Production Casing Cement	150.0	657.0
Full Return?			No
Fluid	Class	Amount (sacks)	Yield (ft³/sack)
Displace...		50	1.18
Mix H2O Ratio (gal/sack)	V (bbl)	Fluid Des	
Other In Hole			
OD (in)	Description	Top (ftKB)	Btm (ftKB)
ID (in)			
Make			
Model			
Install Date	Type	Make	WP (psi)
Size (in)	Last Overhau...		
Wellhead Components			
Make	Model	S...	Top Conn
Top Sz (in)	Btm Conn	Btm Sz (in)	Description
WP (psi)			
General Notes			
Date	Comment		
Job Category	Primary Job Type	Start Date	End Date
Cost Type			
Target Formation	Tgt Depth (ft...)	AFE Number	Total AFE
Total Cost	Final Inv. Cost		
Summary			
Possible Cost Savings	Poss Time Save (hrs)	Estimated Problem Cost	Est Lost Time (hrs)
Job Phases			
Phase Type 1	Planned Likely Phase Cost	Pl Cum Days ML (days)	Planned End Depth (ftKB)
AFE Costs			
Code 1	Code 2	Code 3	Cost Description
Amount			
Job Contacts			
Contact Name	Company	Title	Office
Mobile			

data last updated on 11/15/2005 11:51 PM gmt
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