1 ons जेला ५ (Lebruary 2005)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT				
	BUREAU	JOF	LAND	MANAGEMENT

•	Committee Committee	
	NMSF078390	
	/\/ / Y	

1.08M, APPROVED 074 B No. 1004-0137 Uxpnes, Maich 31, 2007

NMSF07839

SUNDRY NOTICES AND REPORTS ON WELLS

	iis form for proposal ell. Use Form 3160-3			6 If Indian, Allonce or Tribe Name
SUBMIT IN TR	IPLICATE- Other in	structions on reve	rse side.	7. If Unit of CA/Agreement, Name and/or No
3 Name of Oppositor O O		1(t) (0). 3b. Phone No. (in the 2 34 428	k urea code) 5-7069	8. Well Name and No. Some Soft LS #3A 9. API Well No. 30. 045. 23769 10. Field and Pool, or Exploratory Area Ofer Dlanco Mesaverdes 11. County or Parish, State
NW/NW Sec	15 T28	N ROSU)	San Juan MOBIL
12. CHECK AI	PPROPRIATE BOX(ES)	TO INDICATE NATU	RE OF NOTICE, RI	EPORT, OR OTHER DATA
TYPE OF SUBMISSION		TY	PE OF ACTION	100 Ou 8
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (Statement of Statement of Statem	Well Indeprity
If the proposal is to deepen dire Attach the Bond under which the following completion of the intesting has been completed. Fit determined that the site is ready BP AMENICA Demus SSION How Subdivace	ctionally or recomplete horizone work will be performed or proled operations. If the operanal Abandonment Notices must for final inspection. Avaluation of the Change to Change	ntally, give subsurface location ovide the Bond No. on file tion results in a multiple correct be filed only after all required to the Compact of the Compac	ons and measured and true with BLM/BIA. Require pletion or recompletion in ements, including reclama OCATOM XXIA ALL	y proposed work and approximate duration thereof. e vertical depths of all pertinent markers and zones. d subsequent reports must be filed within 30 days in a new interval, a Form 3160-4 must be filed once ation, have been completed, and the operator has CHRULLY PRIVICE METHOD FORM OCATION PERCUAT CONTROL OCATION PERCUAT OCATION PERCUAT
rate will be Chacra.	e 15% (Hanco Me	'saverde	and 85% Effera
14. Thereby certify that the fore Name (Printed/Typed)	going is true and correct OU (U) La) MOC	1	Production 30	on Analyst :
	THIS SPACE FO	R FEDERAL OR S	STATE OFFICE	ÚSE
Approved by Matt Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to Title 18 USC Section 1001 and Title	ttached. Approval of this not or equitable title to those rigl conduct operations thereon.	tice does not warrant or hts in the subject lease		M-FFO. make to any department or agency of the United
States any false, fictitious or fraudule	ent statements or representati	ons as to any matter within i	ts jurisdiction.	, mane to any department of agency of the Office

(Instructions on page 2)