

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004	
5. Lease Serial No.	JICARILLA CONTRACT #105
6. If Indian, Allottee, or Tribe Name	JICARILLA APACHE TRIBE
7. If Unit or CA. Agreement Designation	
8. Well Name and No.	JENNEY #1M
9. API Well No.	30-039-21513
10. Field and Pool, or Exploratory Area	Basin DK / Blanco MV / Wildhorse GP
11. County or Parish, State	RIO ARriba COUNTY, NM

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	3b. Phone No. (include area code) 505-632-8056
2. Name of Operator PATINA OIL AND GAS CORPORATION	
3a. Address 5802 US HIGHWAY 64, FARMINGTON, NM 87401	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990' FSL - 780' FEL, UL "F" SEC. 13, T26N, R4W	

12. CHECK APPROPRIATE BOX(S) 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 type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-off
<input checked="" 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and abandon	<input type="checkbox"/> Temporarily Abandon	<b>Set CIBP and Packer</b>
	<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 thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths or pertinent markers and sands. Attach the Bond under which the work will 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 reclamantion, have been completed, and the operator has determined that the site is ready for final inspection.)

**The Basin Dakota and the Blanco Mesa Verde zones have been shut in. CIBP set @ 7750', packer set @ 6050'.**

**SEE ATTACHED FINAL RIG REPORT.**



2006 MAR 3 PM 2 13  
RECEIVED  
070 FARMINGTON NM

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

Name (Printed/ Typed)

MIRANDA MARTINEZ

Title

REGULATORY ANALYST

Signature

*Miranda Martinez*

Date

3/3/2006

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

Approved by

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.

Title

Office

MAR 30 2006

FARMINGTON FIELD 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

# Patina San Juan, Inc.

## DAILY OPERATIONS REPORT

<b>Lease Name &amp; Well Number</b> Jenney #1M		<b>Report date:</b> 01/04/06 <b>Report time:</b> 0700 Hrs		<b>Purpose:</b> Recompletion		<b>Operation Type</b>	
				<b>Zone of interest:</b> Gallup		Completion Recompletion <input checked="" type="checkbox"/> X Workover	
<b>Report #:</b> 9	<b>AFE #:</b> 05RC5005	<b>RKB:</b>					
<b>Supervisor:</b> H. HILL		<b>Formation:</b> POINT LOOK OUT		<b>Formation:</b> GALLUP			
<b>Phone #:</b> 505-320-5470		<b>Perfs:</b> 5926-5980		<b>Perfs:</b> 7470-7562			
<b>Fax #:</b>							
<b>Plug Back Depth:</b> 7750CIBP							
<b>Packer Depth:</b>							
<b>SITP:</b> @		<b>Tubing Data:</b>					
<b>SICP:</b> 325PSI @ 7:00		<b>Casing Data:</b> 7 5/8" 26.4# 5 1/2" 17" Liner Top @ 3849					

### Last 24 Hour Activity Summary

### Last 24 Hour Activity Detail

Time		Elapsed Time	Description
From	To		
7:00	8:00	1:00	Warm Up Rig & Air Unit, Hold Safety Meeting.
			Replaced Washed Out 3" "T" On Flow Back Tank, Bleed Down Well.
8:00	10:30	2:30	T.I.H. To CIBP @ 7750 Blow Well Dry. Recovered 40 BBL. Fluid No Sand
10:30	12:30	2:00	T.O.O.H. W/ STC & 2 3/8 String Float.
12:30	15:00	2:30	T.I.H. W/ 2 3/8 STC, 2 3/8 SN, 44 Jts. 2 3/8 4.7# J-55 Tbg, 2 3/8 X 5 1/2" R-3 DBL. Grip Packer, 186 Jts. 2 3/8 4.7# , Packer Set @ 6050.98 In 12,000# Compression, E.O.T.L.A. 7479.80 KB
			Broached Tbg. Going In Hole.
15:00	16:00	1:00	Drop Standing Valve, Test Tbg To 1,000 P.S.I., Swab Tbg. Dry. Retrieve Standing Valve.
16:00	18:00	2:00	Nipple Down B.O.P., Nipple Up Well Head, Rig Down Pulling Unit, Air Unit, Rack Out Pump & Pit.
			FINAL REPORT
			KB 12.00'
			186 Jts 6038.98'
			T.O.P 6050.98'
			R-3 PKR 7.50'
			44 Jts. 1420.07'
			SN .80'
			STC .45'
			E.O.T.L. @ 7479.80' KB
Total hours:		11:00	

### Comments

### Projected 24 Hours

### Costs

Daily Cost	Total Operation Cost	AFE Operation Cost	Total Well Cost	AFE Total Cost
\$10,500	\$292,005	\$198,000	\$292,005	\$200,000