Form 3160-5

## **UNITED STATES**

FORM APPROVED

| (August, 2007)                                                                                                                                                                      | DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT                                                                                                                                                                                                      |                                                                                                                  |                                                                                                 | OMB No. 1004- 0137<br>Expires: July 31, 2010                                            |                                                                                     |                                                                                         |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------|
|                                                                                                                                                                                     |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 |                                                                                         |                                                                                     |                                                                                         |
| Dor                                                                                                                                                                                 | DRY NOTICES AND REPORTS ON WELLS t use this form for proposals to drill or to re-enter an aned well. Use Form 3160-3 (APD) for such proposals                                                                                                             |                                                                                                                  | enter an                                                                                        | Lease Serial No.     NMNM 114365     If Indian, Allottee, or Tribe Name                 |                                                                                     |                                                                                         |
| SUBMIT IN TRIPLICATE - Other Instructions on page 2.                                                                                                                                |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | 7. If Unit or CA                                                                        | . Agreement Name                                                                    | e and/or No.                                                                            |
| 1. Type of Well Oil Well Gas Well Other                                                                                                                                             |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | Well Name and No.                                                                       |                                                                                     |                                                                                         |
| 2. Name of Operator                                                                                                                                                                 |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | George #5                                                                               |                                                                                     |                                                                                         |
| Three Forks Resources, LLC                                                                                                                                                          |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | 9. API Well No.                                                                         |                                                                                     |                                                                                         |
| 3a. Address 3b. Phone No. (include area code)                                                                                                                                       |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | 1                                                                                       |                                                                                     |                                                                                         |
| 555 17th Street, Suite 975, Denver CO 80202 303-318-0717                                                                                                                            |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | 30-043-21007                                                                            |                                                                                     |                                                                                         |
|                                                                                                                                                                                     |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | 10. Field and Pool, or Exploratory Area                                                 |                                                                                     |                                                                                         |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  Lat.                                                                                                        |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 | South S                                                                                 | San Luis Me                                                                         | sa Verde                                                                                |
| 1660' FSL, 2310' FWL, Sec 28 T18N-R3W Long.                                                                                                                                         |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 |                                                                                         |                                                                                     | NM                                                                                      |
| 12 CHECK ADDRO                                                                                                                                                                      | ADDIATE DOV(C) TO DIDIO                                                                                                                                                                                                                                   | ATE MATURE OF                                                                                                    | NOTICE PEROI                                                                                    | Sando                                                                                   |                                                                                     | INIVI                                                                                   |
|                                                                                                                                                                                     | PRIATE BOX(S) TO INDICA                                                                                                                                                                                                                                   |                                                                                                                  |                                                                                                 | KI, OK OTHE                                                                             | RDATA                                                                               |                                                                                         |
| TYPE OF SUBMISSION                                                                                                                                                                  | TYPE OF ACTION                                                                                                                                                                                                                                            |                                                                                                                  |                                                                                                 |                                                                                         |                                                                                     |                                                                                         |
| Notice of Intent                                                                                                                                                                    | Acidize                                                                                                                                                                                                                                                   | Deepen                                                                                                           | Production ( 5                                                                                  | Start/ Resume)                                                                          | Water Shu                                                                           | ut-off                                                                                  |
| ,                                                                                                                                                                                   | Altering Casing                                                                                                                                                                                                                                           | Fracture Treat                                                                                                   | Reclamation                                                                                     |                                                                                         | Well Integ                                                                          | grity                                                                                   |
| Subsequent Report                                                                                                                                                                   | Casing Repair                                                                                                                                                                                                                                             | New Construction                                                                                                 | Recomplete                                                                                      |                                                                                         | Other                                                                               |                                                                                         |
|                                                                                                                                                                                     | Change Plans                                                                                                                                                                                                                                              | Plug and abandon                                                                                                 | Temporarily A                                                                                   | Abandon                                                                                 |                                                                                     |                                                                                         |
| Final Abandonment Notice                                                                                                                                                            | Convert to Injection                                                                                                                                                                                                                                      | Plug back                                                                                                        | Water Dispos                                                                                    | al                                                                                      |                                                                                     |                                                                                         |
| If the proposal is to deepen di<br>Attach the Bond under which the<br>following completion of the inve-<br>testing has been completed. Fir<br>determined that the site is ready for | d Operation (clearly state all pertiner rectionally or recomplete horizontally be work will performed or provide the holved operations. If the operation resual Abandonment Notice shall be file or final inspection.)  complete and has been inspection. | y, give subsurface location<br>the Bond No. on file with<br>sults in a multiple completed only after all require | ons and measured and<br>the the BLM/ BIA. Requestion or recompletion<br>ements, including recla | I true vertical dep<br>uired subsequent in<br>in a new interval,<br>unantion, have been | oths or pertinent in<br>reports shall be fit,<br>a Form 3160-4<br>en completed, and | markers and sands.<br>filed within 30 days<br>shall be filed once<br>d the operator has |
|                                                                                                                                                                                     |                                                                                                                                                                                                                                                           |                                                                                                                  |                                                                                                 |                                                                                         |                                                                                     |                                                                                         |
|                                                                                                                                                                                     | OIL CONS. DIV DIST. 3  OCT 1 0 2017                                                                                                                                                                                                                       |                                                                                                                  |                                                                                                 |                                                                                         |                                                                                     |                                                                                         |
|                                                                                                                                                                                     | CT 1 0 2017                                                                                                                                                                                                                                               | 44 ()                                                                                                            |                                                                                                 |                                                                                         |                                                                                     |                                                                                         |
|                                                                                                                                                                                     |                                                                                                                                                                                                                                                           |                                                                                                                  | - 0 201/                                                                                        |                                                                                         |                                                                                     |                                                                                         |

14. I hereby certify that the foregoing is true and correct. Name (Printed Typed) Title **IRENE TRUJILLO OPERATIONS TECHNICIAN** Signature Date 9/8/2017 THIS SPACE FOR FEDERAL OR STATE OFFICE USE 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 till which would entitle the applicant to to those rights in the subject lease Office which would entitle the applicant to conduct operations thereon.

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, fictitiousor fraudulent statements or representations as to any matter within its jurisdiction.