

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.

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

5. Lease Serial No.
Jicarilla Contract 360

6. If Indian, Allottee or Tribe Name
Jicarilla Apache Tribe

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

8. Well Name and No.
Bonanza #6

9. API Well No.
30-043-20521

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

11. County or Parish, State
Sandoval County, New Mexico

SUBMIT IN TRIPLICATE – Other instructions on reverse side

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
DJR Operating, 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)
790 FSL x 1850 FEL
"O" Sec. 12-T22N-R3W

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 checked="" type="checkbox"/> Acidize
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<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 type="checkbox"/> Other _____

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 recomplete 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.)

DJR Operating, LLC performed acidized this well on January 05, 2018. The post job report is attached.

OIL CONS. DIV DIST. 3

JAN 22 2018

ACCEPTED FOR RECORD

JAN 12 2018

FARMINGTON FIELD OFFICE
William Tambekou

RECEIVED

JAN 12 2018

Farmington Field Office
Bureau of Land Management

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

Name (Printed/Typed) Amy Archuleta	Title Regulatory Supervisor
Signature 	Date January 11, 2018

THIS SPACE FOR FEDERAL OR STATE USE

Approved by	Title	Date
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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)

NMOCD

7

1.0 Pumping Schedule

1.1 Designed Pumping Schedule

Stage Number	Description	Flow Path	Fluid System	Clean Volume gal	Slurry Volume gal	Rate Stage Start bpm	Rate Stage End bpm
1	Acid	In	HCL ACID 15% - SBM (27012)	1000	1000	5.0	5.0
2	Flush	In	TREATED WATER	1271	1271	5.0	5.0
3	Shut-In	In		0	0	0.0	0.0
Total				2271	2271		

1.2 Designed Pumping Schedule (continued)

Stage Number	Description	Stage Time min
1	Acid	4.76
2	Flush	6.05
3	Shut-In	0.00
Total		10.81

2.0 Actual Stage Summary

2.1 Stage Summary

Stage Number	Stage Time ucts	Start Time ucts	End Time ucts	Time min	Clean Volume gal	Slurry Volume gal
1	05-Jan-18 09:53:55	09:48:40	05-Jan-18 09:53:55	5.26	1004	1004
2	05-Jan-18 10:00:14	09:53:56	05-Jan-18 10:00:14	6.31	1283	1283
3	05-Jan-18 10:02:59	10:00:15	05-Jan-18 10:02:59	2.75	1	1
Total					2288	2288

3.0 Performance Highlights

3.1 Job Summary

Start Time	05-Jan-18 09:43:57	ucts
End Time	05-Jan-18 10:02:59	ucts
Start Averaging Time	05-Jan-18 09:48:41	ucts
End Averaging Time	05-Jan-18 10:02:59	ucts
Clean Volume	2288	gal
Slurry Volume	2288	gal
Gel Volume	1284	gal
Acid Volume	1004	gal
Load to Recover	2288	gal
Volumes Pumped	Total	Units
HCL ACID 15% - SBM (27012)	1004	gal
TREATED WATER	1283	gal

Disclaimer: The average and maximum values (except volumes and bottom hole values) are based on the start and end averaging times.

3.2 Job Stage Log

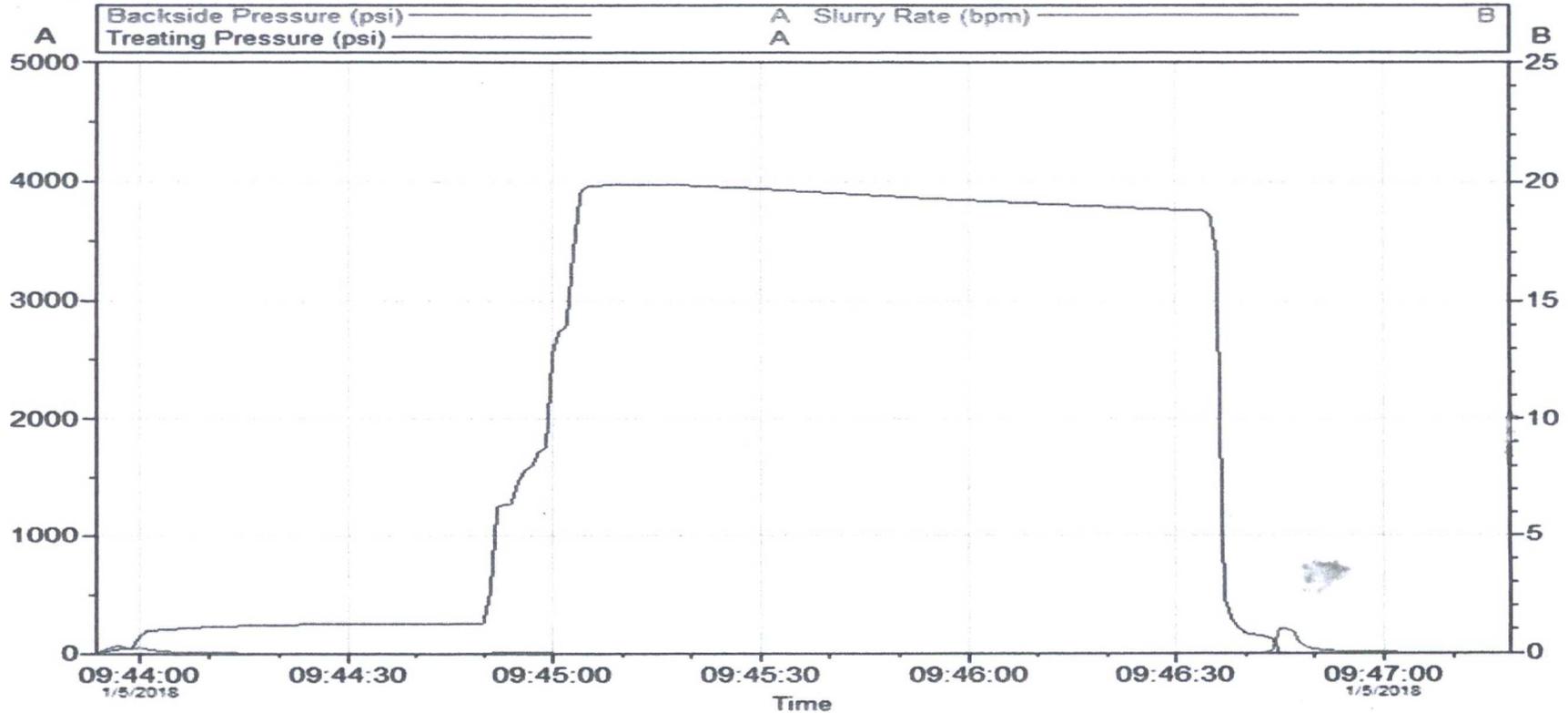
Time ucts	Description	Comment
05-Jan-18 09:48:40	Stage 1	Acid
09:53:56	Stage 2	Flush
10:00:15	Stage 3	Shut-In

3.3 Job Event Log

Stage Number	Event Number	Time ucts	Description	Comment
	1	05-Jan-18 09:43:53	Start Job	Starting Job
1		09:48:40	Stage 1	Acid
		09:48:41	Start Averaging	Start Avg Trt 1
2		09:53:56	Stage 2	Flush
3		10:00:15	Stage 3	Shut-In
		10:02:59	End Averaging	End Avg Trt 1
	2	10:03:02	End Job	Ending Job

4.0 Attachments

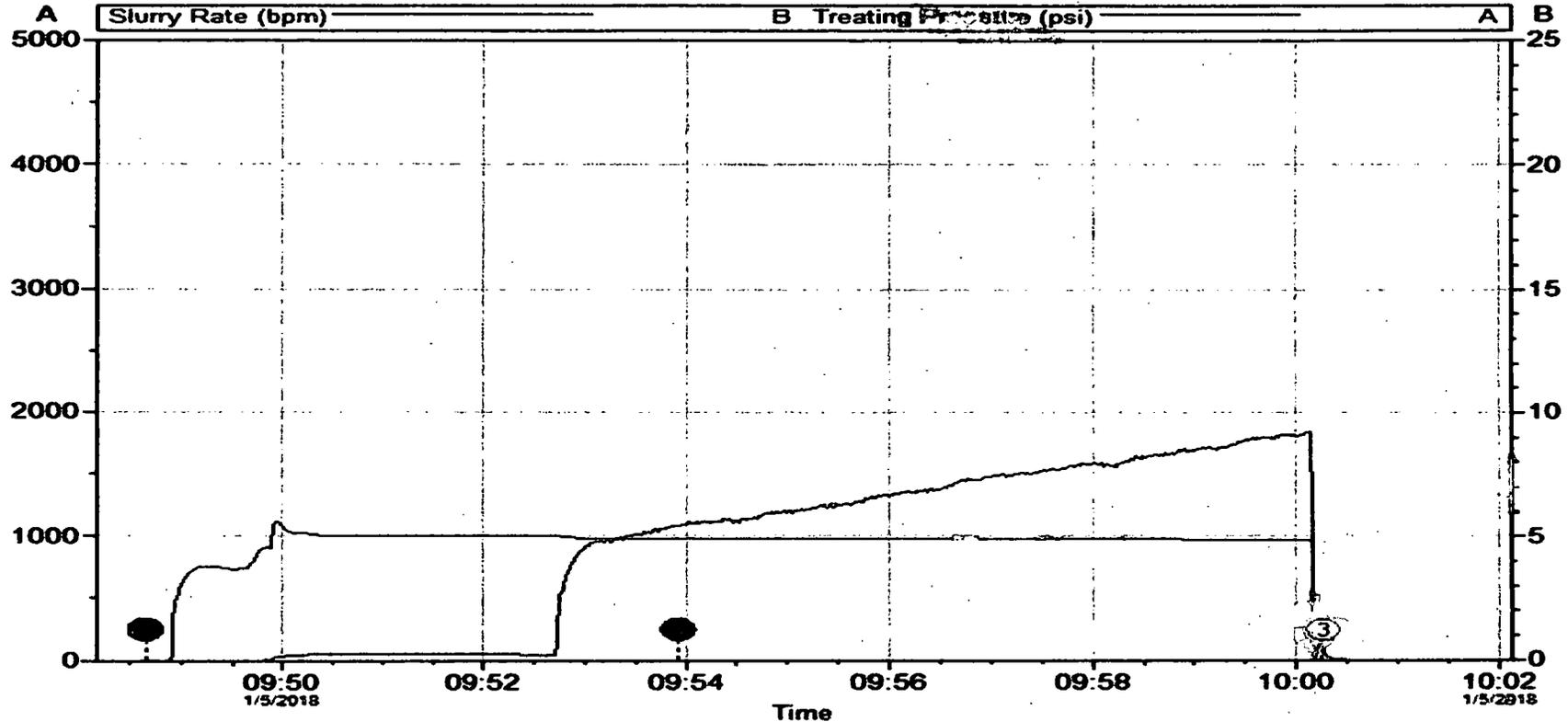
4.1 pressure test



Customer: Well Description:	Job Date: 05-Jan-2018 UWI:	Sales Order #: 0904553768
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HALLIBURTON

4.2 acid treatment



Customer: Well Description:	Job Date: 05-Jan-2018 UWI:	Sales Order #: 0304553768
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