Form 3160-5 1,apr 2015)

UNITED STATES

FORM APPROVED

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS					OMB NO. 1004-0137 Expires: January 31, 2018		
					5. Lease Serial No. NMNM6682		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name			
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA Agreement, Name and or No.		
1. Type of Well					8. Well Name and No. NORTH ALAMITO UNIT 233H		
Oil Well Gas Well Other 2. Name of Operator Contact: SHAW-MARIE CRUES					9. API Well No.		
DJR OPERATING LLC E-Mail: scrues@djrllc.com					30-043-21200		
3a. Address 1 ROAD 3263 AZTEC, NM 87410	3b. Phone No. (include area code) Ph: 505-632-3476			10. Field and Pool or Exploratory Area ALAMITO GALLUP			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 28 T23N R7W SESE 1317FSL 0043 36.194150 N Lat, 107.571220 W Lon					SANDOVAL COUNTY, NM		
12. CHECK THE AF	PPROPRIATE BOX(ES) T	O INDICATE NAT	URE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
□ Notice of Intent	☐ Acidize	☐ Deepen		☐ Production (Start Resume)		☐ Water Shut-Off	
	☐ Alter Casing	☐ Hydraulic Fra	acturing	□ Reclama	ition	■ Well Integrity	
Subsequent Report	☐ Casing Repair	☐ New Constru	□ New Construction □		lete	⊠ Other	
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug and Aba	☐ Plug and Abandon		arily Abandon		
	☐ Convert to Injection ☐ Plug Back			☐ Water Disposal			
13. Describe Proposed or Completed Op. If the proposal is to deepen direction. Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for funitial 24-hour Test	ally or recomplete horizontally, gi rk will be performed or provide the operations. If the operation resu- pandonment Notices must be filed	ve subsurface locations a e Bond No. on file with lts in a multiple complet	and measu BLM/BIA ion or reco	red and true ve Required sub impletion in a n	rtical depths of all pertin sequent reports must be ew interval, a Form 316	ent markers and zones. filed within 30 days 0-4 must be filed once	
Test Date: 7/18/19 Hours Tested: 24				resimmen		The State County of the County	
Test Production: Oil-220 bbls Gas MCF-952 Water-96 Choke Size: 28/64" Tubing Pressure: 210 Casing Pressure: 766					NMOCD		
GOR: 4327 cuft/bbl Production	on Method: Flowing				1111 0 0 0040		
					JUL 29 2019		
				0	ISTRICT II	Appriliation (1)	
14. Thereby certify that the foregoing is	s true and correct.						
	Electronic Submission #47 For DJR OPE	RATING LL¢, sent to	the Far	mington			
Name (Printed Typed) SHAW-MARIE CRUES Title REGULATORY SPECIALIST							
			07/10/5	0.40			
Signature (Electronic		Date	07/19/2			nerORD	
	THIS SPACE FOI	R FEDERAL OR	STATE	OFFICE U	SECCEPTED FOR	KECOKD	

FARMINGTON FIELD OFFICE 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

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 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 page 2)

Approved By

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

