## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004

## SUNDRY NOTICES AND REPORTS ON WELLS

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  RCUD APR12'07		
SUBMIT IN TRIPLICATE - Other Instructions on reverse side				7. If Unit or CA/Agreement, Name and/or No. OIL CONS. DIV.			
1. Type of Well		· · · · · ·	REUELLEU BLIA		nict 2		
Oil Well Gas Well	Other		DLA CONTRACTOR	8. Well N	ame and No.		
2. Name of Operator		2101	2514) 4		nyons 30-04-13 #11H		
Black Hills Gas Resources, Inc.		· · · · · · · · · · · · · · · · · · ·	<u></u>	9. API W	ell No.		
3a. Address 3b. Phone No. (include area code)			30-039-29969				
3200 N 1st Street PO Box 249 Bloomfield, NM 87413 505-634-1111 ext 28			10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T, R., M., or Survey Description) Surface: 590' FNL 1,280' FWL (NW/NW) Unit D Bottom Hole: 1,000' FNL 660' FEL (NE/NE) Unit A Sec. 13, Township 30 North, Range 04 West				East Blanco Pictured Cliffs  11. County or Parish, State  Rio Arriba, NM			
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATU	RE OF NOTICE, R	EPORT, O	R OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION						
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 (Start Reclamation Recomplete Temporarily Aba Water Disposal	·	Water Shut-Off  Well Integrity  Other Name Change		
If the proposal is to deepen direct Attach the Bond under which the following completion of the inv	ctionally or recomplete horizontally ne work will be performed or provi olved operations. If the operation re al Abandonment Notices shall be a for final inspection.)	, give subsurface location de the Bond No. on file v esults in a multiple comp filed only after all require	ns and measured and true with BLM/BIA. Require letion or recompletion in ements, including reclar	e vertical dep ed subsequen n a new inter nation, have	work and approximate duration thereof ths of all pertinent markers and zones. It reports shall be filed within 30 days val, a Form 3160-4 shall be filed once been completed, and the operator has		

changing the name from the Many Canyons 30-04-13 #11H to the Many Canyons 30-04-13 #111.

14. 1 hereby certify that the foregoing is true and correct Name (Printed Typed)  Daniel R. Manus	Title j	Regulatory Technician	ACCEPTE	FOR RECORD
Signature Miel Rows	Date	4-3-07		0 4 2007
THIS SPACE OF	FEDERAL OR	STATE OFFICE USE	es establica	Noun element
Approved by (Signature)		Name (Printed/Typed)	Title	
Conditions of approval, if any, are attached. Approval of this notice decertify that the applicant holds legal or equitable title to those rights in which would entitle the applicant to conduct operations thereon.	oes not warrant or in the subject lease	Office		Date

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.