IT 3160-5 DEPARTMENT OF THE INTERIOR Budget Bureau No. 1004-0135	UNITED		FORM APPROVED DIST. 3
SURDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to did for 10 deepen or "ART MEMBERS" 18 NMNM-99735 8. Indian, Alkotike or Tribe Name SUBMIT IN TRIPLICATE 1. Type of Well SUBMIT IN TRIPLICATE 1. Type of Well Gas Wall Other 2. Name of Operating, LLC (163458) 3. Address and Telephone No. PO Box 5513 Farmington, NM 87499 4. Location of Well (Footage, Sec. T. R. M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. Curry or Parks, State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent Recompletion Plugging Back Non-Routine Fracturing New Construction Non-Routine Fracturing New Construction Non-Routine Fracturing New Construction Non-Routine Fracturing Non-Routi			Budget Bureau No. 1004-0135
Do not use this form for proposals to drill or to deepen or rest. **Marking and to the control of the control o	(June 1990) BUREAU OF LANI	DMANAGEMENT	
Do not use this form for proposals to diffu or to deepen or "APP, PERFERT " OF such proposals to get "APPLICATION FOR PERMIT " for such proposals to get "APPLICATION FOR PERMIT " for such proposals to get the proposals to get the proposals of t	SLINDDY NOTICES AND	PEDAPTE AN WELLS	5. Lease Designation and Serial No.
SUBMIT IN TRIPLICATE	Do not use this form for proposals to drill or	to deepen or radially by different resolvoir.	1 16 NMNM-99735
Type of Well	Use "APPLICATION FOR PE	RMIT -" for such proposals	6. If Indian, Allottee or Tribe Name
Type of Well Gas Well Other S. Well Name and No.	STIPMIT IN T		
Oil Well Gas Well	··· · · · · · · · · · · · · · · · · ·	670 FARMINGTO	7. If Unit or CA, Agreement Designation
2. Name of Operator Synergy Operating, LLC (163458) OGRID # 163458 Synergy 21-7-8 # 138. 3. Address and Telephone No. PO BOX 5513 Farmington, NM 87499 4. Location of Wal (Footage, Sec. T. R. M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. County or Persh. State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Subsequent Report Subse			
Synergy Operating, LLC (163458) OGRID # 163458 Synergy 21-7-8 # 138. 3. Address and Telephone No. PO Box 5513 (505) 325-5549 30-043-21033 10- Field and Pool, or Exploratory 4. Location of Well (Focases, Sec. T. R., M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W Basin Fruitland Coal 11. Cauthy or Parish, State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSIO	Oil Well Gas Well	Other	8. Well Name and No.
3. Address and Telephone No. PO Box 5513 Farmington, NM 87499 4. Location of Well (Footage, Sec. T. R., M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W Basin Tulidad Coal 11. Cauchy or Parish, State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Abandoment Basin Trype OF ACTION Notice of Intent Recompletion Plugging Back Casing Repair Albering Casing Other Plugging Back Conveyton to Injection Dispose Water Final Abandomment Notice Albering Casing Other Final Abandomment of Injection Dispose Water Study St	=""		
PO Box 5513 (505) 325-5549 30-043-21033 10. Field and Pool, or Exploratory 4. Location of Well (Footage, Sec. T. R. M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. County or Parish, State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandoment Notice Plugging Back Non-Routine Fracturing United Plugging Back Non-Routine Fracturing United Plugging Back Non-Routine Fracturing United Report Plugging Back Non-Routine Fracturing United Report Non-Routine Report Non-Routine Report United Report Non-Routine Fracturing United Report Non-Routine Report Non-Routine Report United Report Non-Routine Report United Report Non-Routine Report Non-Routine Report United Report Non-Routine Report Non-Routi	Synergy Operating, LLC (163	458) OGRID # 163458	
### Farmington, NM 87499 4. Location of Well (Footage, Sec. T. R. M. or Survey Description) Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. County or Parsh, Sites Sandoval Countly New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 17PE OF ACTION Notice of Intent Abandoment Recompletion Plugging Back Casing Repair Casing Repair Altering Casing Other 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, sellmeted date of starting work. If well is directionally drilled give subsurface localions and measured and true vertical depths for all markers and zones of pertinent to this work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. Title: Engineering Manager Date: 05-04-2007 Telephone: (505) 566-3725 This space for federal or state office use MAY 1 5 2007 Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 5 2007	3. Address and Telephone No.		
Unit 0, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W Unit 0, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. county or Parksh, State Sandoval Countly New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandoment Recompletion Plugging Back Non-Routine Fracturing Water Shu-Off Casing Repair Attering Casing Other 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated of starting work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. Title: Engineering Manager Date: 05-04-2007 Thomas E. Mullins Tribe is engineering Manager Date: 05-04-2007 Thomas E. Mullins Title: Engineering Manager Date: 05-04-2007 Thomas E. Mullins Title: Engineering Manager Date: MAY 1 5 2007 MAY 1 5 2007	PO Box 5513	(505) 325-5549	30-043-21033
Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W Basin Fruitland Coal	Farmington, NM 87499		10. Field and Pool, or Exploratory
Unit O, 1135' FSL, 1820' FEL, Sec 08, T21N - R07W 11. County or Parish, State Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent	4. Location of Well (Footage, Sec, T. R., M, or Survi	ey Description)	
Sandoval County New Mexico 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Abandoment		0 .00 7041 5074	
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE. REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent	Unit O, 1135' FSL, 1820' FEL,	Sec 08, T21N - R07W	
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION Notice of Intent			1
Notice of Intent Abandoment	42 CHECK ARRECORDIATE BOY(S) TO I	NDICATE NATURE OF NOTICE REPORT	
Subsequent Report Subsequent Report Plugging Back Casing Repair Water Shut-Off Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Pluggi		TYPE OF ACT	ION
Subsequent Report Subsequent Report Plugging Back Casing Repair Water Shut-Off Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Plugging Back Casing Repair Converion to Injection Dispose Water Plugging Back Pluggi	Niction of Intent	Abandament	Change of Blaze
Subsequent Report Final Abandonment Notice Fin	Notice of filterit	; H	—
Final Abandonment Notice	Subsequent Report	, 🗀 ்	
Other Dispose Water (Note Report results of multiple completion on Well Completion or recompletion Report and Log Form) 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. 9 TO DRILL 14. I hereby certify that the thregoing's true and contain Signed: Title: Engineering Manager Date: 05-04-2007 Thomas E. Mullins Tom.mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	- :	. –	
(Note: Report results of multiple completion on Well Completion on Mell Completion on Completion Report and Log Form) 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. 14. I hereby certiff that the tyregoing is true and confeit Signed: Title: Engineering Manager Date: 05-04-2007 Thomas E. Mullins tom.mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	Final Abandonment Notice	. —	·
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. 9 14. I hereby certific that the synegoing is true and completed to the synegoing is true and completed. 15. Signed: Title: Engineering Manager Date: 05-04-2007 Thomas E. Mullins tom. mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	·	Otner	
13. Describe Proposed or Completed Operations (Clearly state all perlinent details, and give perlinent dates, including, estimated date of starting work. If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work. SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. 9 14. I hereby certify that the pregoingris true and corport Signed: Thomas E. Mullins tom. mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: Date: MAY 1 0 2007			
SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD. SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. 14. I hereby certify that the pregoingris true and correct Signed: Thomas E. Mullins This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	13. Describe Proposed or Completed Operations (Clear	ly state all pertinent details, and give pertinent dates, inc	
SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. **THIS WELL** 14. I hereby certify that the treggoing is true and correct Signed: Thomas E. Mullins Thomas E. Mullins Tom mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	If well is directionally drilled give subsurface locations	and measured and true vertical depths for all markers	and zones of pertinent to this work.
SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION UNTIL JULY 24, 2008 TO DRILL THIS WELL. **THIS WELL** 14. I hereby certify that the treggoing is true and correct Signed: Thomas E. Mullins Thomas E. Mullins Tom mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date: MAY 1 0 2007	SYNERGY OPERATING LLC REQUESTS A	ONE (1) YEAR EXTENSION FOR THIS AF	, מי
Approved by: Original Signed: Stephen Mason Title: Date: Date: Date: MAY 1 0 2007	SYNERGY IS RE-EVALUATING OUR CURR	` .	
Approved by: Original Signed: Stephen Mason Title: Date: Date: Date: MAY 1 0 2007	•		
14. I hereby certify that the foregoinor's true and correct Signed:			
Approved by: Original Signed: Stephen Mason Title: Engineering Manager Date: 05-04-2007 The Engineering Manager Date: 05-04-2007 Thomas E. Mullins tom mullins@synergyoperating.com Telephone: (505) 566-3725 MAY 1 0 2007		·	
Approved by: Original Signed: Stephen Mason Title: Engineering Manager Date: 05-04-2007 The Engineering Manager Date: 05-04-2007 Thomas E. Mullins tom mullins@synergyoperating.com Telephone: (505) 566-3725 MAY 1 0 2007			
Approved by: Original Signed: Stephen Mason Title: Engineering Manager Date: 05-04-2007 The Engineering Manager Date: 05-04-2007 Thomas E. Mullins tom mullins@synergyoperating.com Telephone: (505) 566-3725 MAY 1 0 2007			
Approved by: Original Signed: Stephen Mason Title: Date: Date: Date: MAY 1 0 2007		1	
14. I hereby certify that the foregoind's true and correct Signed:			
14. I hereby certify that the three degrations true and correct Signed: Thomas E. Mullins This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Engineering Manager Title: Engineering Manager Telephone: (505) 566-3725 MAY 1 0 2007	The top of the A	no lat - mul	10 mal Ot dill
Thomas E. Mullins tom mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date:	14. I hereby certify that the thegoing is true at		we men (a ume of willer
Thomas E. Mullins tom mullins@synergyoperating.com Telephone: (505) 566-3725 This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date:	000000000000000000000000000000000000000	//	Annana Data: 05.04.0007
This space for federal or state office use Approved by: Original Signed: Stephen Mason Title: Date:			· · · · · · · · · · · · · · · · · · ·
	<u>"</u>	Continuent (Continuent of the Continuent of the	Supplied (and) and of 20
	Approved by: Original Signed: Steph	en Mason тitle:	Date: MAY 1 0 2007
	·		
	18 U.S.C. Section 1001, make it a crime for any person knowingly an presentations as to any matter within its jurisdiction	o williamy to make to any department or agency of the United Sta	nes any raise, incurious, or iraudulem statements
18 U.S.C. Section 1001, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, ficticious, or fraudulent statements presentations as to any matter within its jurisdiction	· · · · · · · · · · · · · · · · · · ·		•