Form 3160-5 DEPARTMENT OF THE INTERIOR	FORM APPROVED DIST. 3
······································	Budget Bureau No. 1004-0135
(June 1890) BUREAU OF LAND MANAGEMENT	Expires March 31, 1993
porter to or british the terms of	5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELL Sweet	
SUNDRY NOTICES AND REPORTS ON WELL Single 7 1 1 Do not use this form for proposals to drill or to deepen or reener to a different reservoir	1 15 _{SF-080384}
Use "APPLICATION FOR PERMIT -" for such proposals RECEIVED	6. If Indian, Allottee or Tribe Name
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SUBMIT IN TRIPLICATE 1. Type of Well	NINM
1. Type of Well 管理學 管理管理	7. If Unit or CA, Agreement Designation
	!
☐ Oil Well ☐ Gas Well ☐ Other	
	8. Well Name and No.
2. Name of Operator	
Synergy Operating, LLC (163458) OGRID # 163458	BartRyley FC # 2
	9. API Well No.
Address and Telephone No.	
PO Box 5513 (505) 325-5549	30-045-33661
Farmington, NM 87499	10. Field and Pool, or Exploratory
4. Location of Well (Footage, Sec, T. R., M, or Survey Description)	To: Field and Foot, or Exploratory
Location of Well (Fuolage, Sec. 1. R., M. of Survey Description)	Booin Emitland Cool
II WAA AARALENII WAALEEL A LA ECCO MACCO	Basin Fruitland Coal
Unit H, 1950' FNL, 740' FEL, Sec 10, T26N - R12W	11. County or Parish, State
	San Juan
	New Mexico
12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OF	
TYPE OF SUBMISSION TYPE OF ACTIO	
✓ Notice of Intent ☐ Abandoment ☐	Change of Plans
Recompletion	New Construction
Subsequent Report Plugging Back	Non-Routine Fracturing
Casing Repair	Water Shut-Off
Final Abandonment Notice Altering Casing	Converion to Injection
Other	Dispose Water
	(Note: Report results of multiple completion on Well
·	Completion or recompletion Report and Log Form)
40. Burght Burght Countries (Clark all and a decider and all all and all all all and all all and all all all and all all all all all all all all all al	
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, included the complete of the com	
if well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and	d zones or pertinent to this work.
SYNERGY OPERATING, LLC REQUESTS A ONE (1) YEAR EXTENSION FOR THIS APD	•
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SYNERGY IS RE-EVALUATING OUR CURRENT ACTIVITY REQUIRING AN EXTENSION	UNTIL MAY 31, 2008 TO DRILL
THIS WELL.	7
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Support och sulla Variable time Lymink die	mot Q time on drille
Turrent OCK Release regulations must be	met @ time of driller
Whent OCD wells to regulations must be 1	met @ time of driller
Whent OCK thestory regulations must be 1	met () time of drilles
Urrent OCA tyles regulations must be 1 14. I hereby certify that the foregoing is true and object Signed: Title: Engineering Mai	
Writent OCD Tules regulations must be 1 14. I hereby certify that the foregoing is true and object Signed:	*
When to the state of the state	com Telephone: (505) 566-3725
14. I hereby certify that the foregoing is true and chirect Signed: Title: Engineering Mar Thomas E. Mullins tom.mullins@synergyoperating. This space for federal or state office use	com Telephone: (505) 566-3725 MAY 1 C 201
14. I hereby certify that the foregoing is true and charect Signed: Thomas E. Mullins This space for federal or state office use Approved by: Original Signed: Stephen Mason Title:	com Telephone: (505) 566-3725
14. I hereby certify that the foregoing is true and chrect Signed: Thomas E. Mullins This space for federal or state office use	com Telephone: (505) 566-3725 MAY 1 C 201
Uritent OCA Indiana regulations must be 1 14. I hereby certify that the foregoing is true add charact Signed: Thomas E. Mullins This space for federal or state office use Approved by: Original Signed: Stephen Mason Title:	com Telephone: (505) 566-3725