Form 3160-5 (June 1990)

ir representations as to any matter within its jurisdiction

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No 1004-0135

Expires: March 31,1993

SUNDRY NOTICES AND REPORTS ON WELLS 2007 111 24 PM		ŊM-2ή741
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.		6 If Indian, Allotted or Tribe Name
Use "APPLICATION FOR PERMIT -" for such proposals RECEIVED SUBMIT IN TRIPLICATE BL M		
	TRIPLICATE BLM 210 FARMEST	N MM
1. Type of Well Oil Gas		역 설계 7 ⁷ If Unit or CA, Agreement Designation
Well X Well	Other	
2 Name of Operator		8. Well Name and No.
		Dinger #90
·		9. API Well No.
P.O. Box 420, Farmington, NM 87499 (505) 325 - 1821 Location of Well (Footage, Sec., T , R., M., or Survey Description)		30 045 34020 10. Field and Pool, or Exploratory Area
Eccation of west to cotage, sec., 1, 14, 191, of survey besorptions		10. Field and Foot, of Exploratory Area
1900' FSL & 1635' FEL (NW/4 SE/4)		Basin Fruitland Coal
Unit J, Sec. 28, T24N, R10W, NMPM		11. County or Parish, State
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OT		San Juan, NM
TYPE OF SUBMISSION	TYPE OF ACTION	THER DATA
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
	Casing Repair	Water Shut-Off
Final Abandonment Notice	☐ Altering Casing ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐ ☐	Conversion to Injection Dispose Water
	Z Other Completion	(Note Report results of multiple completion on Well
13 Describe Proposed or Completed Operations (Clearly state all pertinen	t details, and give pertinent dates, including estimated date of starting any pro	Completion or Recompletion Report and Log form) Dosed work If well is directionally drilled,
give subsurface locations and measured and true vertical dept	ns for all markers and zones pertinent to this work)*	RCVD JUL26'07
		OIL CONS. DIV.
/ ·		karnal karnal
Pressure tested casing to 3000 ps		
Fruitland Coal from 1094'-1112' w	Safe gel; 80,000#	
20/40 Brady sand (7/18/07).		
		ACCEPTED
		ACCEPTED FOR RECORD
		JUL 2 5 2007
		FARMATON FIT DOCTOR
		TY IL Salvers
14 I hereby certify that the foregoing is true and correct		
	\mathcal{A}_{\cdot}	
Signed Alexander	Vice-President Date	7/23/2007
This space for/Federal or State office use)		
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Approved by	Title Date	
Conditions of approval, if any		
itle 18 U.S.C. Section 1001, makes it a crime for any person knowingly an	d willfully to make to any department or agency of the United States any false,	fictitious or fraudulent statements