UNITED STATES DEPARTMENT OF THE INTERIOR RUREAU OF LAND MANAGEMENT

	DOREAU OF LAND MANAGEME		
Sundry Notices and Reports or	n Wells		
	RECEIVED	5.	Lease Number Jicarilla Contract 110
Type of Well GAS	OCT 2 5 2007	6.	If Indian, All. Or Tribe Name
Name of Operator CDX RIO, LLC	Bureau of Land Management Farmington Field Office	7.	Jicarilla Apache Unit Agreement Name
Address & Phone No. of Operator		8.	Well Name & Number
 Address & Phone No. of Operator 2010 Afton Place, Farmington, New Mexico 87401 (505) 326-3003 		9.	Jicarilla A #2E API Well No.
4. Location of Well, Footage, Sec., T, R, M 1120'FSL, 1520'FEL, Sec.18, T-26-N, R-5-W, NMPM		10.	30-039-22581 Field and Pool
		11.	Tapacito Gal/Basin DK County and State
			Rio Arriba Co, NM
X Subsequent Report C C C Final Abandonment A X O Describe Proposed or Completed O 10-17-07 MIRU. TOOH w/59 7/8" rods, 207 ¾" rods & p 10-18-07 TOOH w/239 jts 2 3/8" tbg 10-19-07 TIH w/240 jts 2 3/8" 4.7# J ND BOP. NU WH. TI psi, OK. SD for weeke 10-22-07 RD. Rig released.	Non-Routine Fracturing Asing Repair Water Shut off Conversion to Injection Ther Pump repair Perations Ods. ND WH. NU BOP. TIH to PBTD @ 7533' Company of the pump. SDON. Blow well & CO. SDON. September 55 EUE tbg, landed @ 7520'. (SN @ 7483'). FIH w/88 7/8" rods, 207 3/4" rods & pump. Load to end.	Pump 40 bbl 2	% KCl wtr down tbg.
00	Title Agent	1	Date 10-23-07 .
		ASS	SHOP CHANCE
	1 tue		OCT 2 9 2007
		FAR	MINGTON FIELD UPPICE
	Type of Well GAS Name of Operator CDX RIO, LLC Address & Phone No. of Operator 2010 Afton Place, Farmington, New I Location of Well, Footage, Sec., T, 1120'FSL, 1520'FEL, Sec.18, T-26-P CHECK APPROPRIATE BOX TO Type of Submission Notice of Intent A Subsequent Report Final Abandonment A Subsequent Report Final Abandonment A O Describe Proposed or Completed O 10-17-07 MIRU. TOOH w/59 7/8" rods, 207 ¾" rods & p 10-18-07 TOOH w/239 jts 2 3/8" tbg 10-19-07 TIH w/240 jts 2 3/8" 4.7# J ND BOP. NU WH. Ti psi, OK. SD for weeke 10-22-07 RD. Rig released. I hereby certify that the foregoing is ned Approved that the foregoing is space for Federal or State Office use PROVED BY NDITION OF APPROVAL, if any: 18 U.S.C. Section 1001, makes it a crume for any person knowing 18 U.S.C. Section 1001, makes it a crume for any person knowing	Type of Well GAS OCT 2 5 2007 Bureau of Land Management Farmington Field Office OCDX RIO, LLC Address & Phone No. of Operator 2010 Afton Place, Farmington, New Mexico 87401 (505) 326-3003 Location of Well, Footage, Sec., T, R, M 1120 FSL, 1520 FEL, Sec. 18, T-26-N, R-5-W, NMPM CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPOI Type of Submission Notice of Intent Abandonment Notice of Intent Accompletion Non-Routine Hracturing Plugging Non-Routine Hracturing Casing Repair Gasing Repair Altering Casing Conversion to Injection Describe Proposed or Completed Operations 10-17-07 MIRU. TOOH w/59 7/8" rods. ND WH. NU BOP. TIH to PBTD @ 7533", rods, 207 ¾" rods & pump. SDON. 10-18-07 TOOH w/239 jis 2 3/8" 'tbg. Blow well & CO. SDON. 10-19-07 TIH w/240 jis 2 3/8" 'tbg. Blow well & CO. SDON. 10-19-07 TIH w/240 jis 2 3/8" 'tsg. Blow well & CO. SDON. 10-19-07 TIH w/240 jis 2 3/8" 'tsg. Blow well & CO. SDON. 10-22-07 RD. Rig released. Thereby certify that the foregoing is true and correct. Interest of the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. Thereby certify that the foregoing is true and correct. The correct of the correct of the correct of the correct of the correc	Type of Well GAS OCT 2 5 2007 Bureau of Land Management Farmington Field Office 7. Address & Phone No. of Operator CDX RIO, LLC Address & Phone No. of Operator 2010 Afton Place, Farmington, New Mexico 87401 (505) 326-3003 9. Location of Well, Footage, Sec., T, R, M 1120 FSL, 1520 FSL, Sec. 18, T-26-N, R-5-W, NMPM 10. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER ITYPE of Submission Type of Submission Type of Action Notice of Intent Abandonment Recompletion Recomplet