Form 3160-5 (November 1994)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No 1004-0135
Expires July 31, 1996

Lease Serial No.

NM

NMNM-25449

		SUNI	DRY	NOTIC	CES	AND REPO	RT	S ON	WE	LLS	
Do	not	use	this	form	for	proposals	to	drill	or	reenter	an
aba	ndo	ned v	vell.	Use I	Form	3160-3 (Al	PD)	for s	uch	proposa	als.

NA RCVD FEB 18'08

6. If Indian, Allottee or Tribe Name

abandoned wen,	0301 01111 0100 0 (711 2	, ro, cuen proposa.	۱۲	NA	WOAD LED TO O		
			The second second	7. If Unit or C	A/Agreement, Name and/or N		
SUBMIT IN TRIPL	ICATE – Other instri	uctions on revers	e side	N/A	OIL CONS. DIV		
1. Type of Well		CEIVED			DIST. 3		
X Oil Well Gas Well	Other	100 (20 () (20 ()		8. Well Name	and No.		
2. Name of Operator	F	EB 1 2 2008	<u> </u>	Bisti Gallup			
Elm Ridge Exploration Co Ll	LC '			9. API Well N			
a. Address	Bureau		** L	30-045-34209			
PO Box 156, Bloomfield, NM		n 505-632-3476-x2	-		ool, or Exploratory Area		
Location of Well (Footage, Sec.,	T., R., M., or Survey Descript	ion)	<u> </u>	Bisti Lower Gallup			
80' FNL x 2150' FEL			ľ	11. County or Parish, State			
B" Sec.22-T25N-R12W			8	San Juan County, NM			
2. CHECK APPROPRIATE BOX	X(ES) TO INDICATE NAT	TURE OF NOTICE, RI	EPORT, OR OTH	ER DATA			
TYPE OF SUBMISSION	TYPE OF ACTION	······································		······································			
N. 4 CT. 4 - 4			T D 44: (6		☐ Water Shut-Off		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Reclamation	Start/Resume)	Well Integrity		
X Subsequent Report	Casing Repair	New Construction	Recomplete		Other Spud		
A pussequent report	Change Plans	Plug and Abandon	Temporarily	Abandon	Surface csg.		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispos	sal			
Elm Ridge Exploration Co, L 4# J-55 casing to 3 <u>75</u> ' we circulated 26 bbls of good co rith the BLM was notified bu	then pumped 320 sks ement to surface, Pres	s of Type G cemen	t w/ 2% calciun	n chloride a	asn 1/8# of polyflake.		
					ACCEPTED FOR RECORD FEB 1 4 2008 ARMENISTON FIELD OFFICE TE Sources		
4. I hereby certify that the foregoing	is true and correct	1					
Name (Printed/Typed) Sharla	O'kelly	Title	Production	tion Assistant			
Signature ()	OVO OO	Date		ry 9, 2008			
	THIS SPACE	FOR FEDERAL OR ST					
pproved by	The state of the s	Title	<u> </u>	Date			
conditions of approval, if any, are attached ertify that the applicant holds legal or equivalent would entitle the applicant to conduct	table title to those rights in the su	warrant or Office bject lease					

(Instructions on reverse)

fraudulent statements or representations as to any matter within its jurisdiction.

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or