Form 3160-5 (August, 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

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FORM APPROVED

OMB No 1004-0137

	BUREAU OF LAND M	ANAGEMEN	1 JON TO SC		Expires July 31, 2010		
SUN	NDRY NOTICES AND RI	EPORTS ON	WELLS Load Mo	5 Lease Senal	No NMNM-114365		
Do no	ot use this form for proposal	s to drill or to re	e-enter-anaton Field	65 If Indian, All	ottee, or Tribe Name		
	oned well. Use Form 3160-3 TRIPLICATE - Other Instru			7 If Unit or CA	A Agreement Name and/or No		
Oil Well Gas Well	Other			8 Well Name a	and No		
2 Name of Operator					George #1		
Three Forks Resources, LLC		3b Phone No (in	aluda awa anda)	9 API Well No	•		
1775 Sherman Street, Suite 1675, Denver CO 80203			b Phone No (include area code) 303-318-0717		30-043-21009		
		<u> </u>			10 Field and Pool, or Exploratory Area		
4 Location of Well (Footage, Sec., T	Lat.	35.75772333	San L	uis Mesaverde South			
1069' FSL, 2182' FW	Long.	-107 1590168	Sanda				
12 CHECK APPROF	PRIATE BOX(S) TO INDICA	TE NATURE O	F NOTICE, REPOR	T, OR OTHE	R DATA		
TYPE OF SUBMISSION		TYPE OF ACTION					
Notice of Intent	Acidize	Deepen	Production (S	tart/ Resume)	Water Shut-off		
	Altering Casing	Fracture Treat	Reclamation		Well Integrity		
Subsequent Report	Casing Repair	New Construction	Recomplete		Other		
	Change Plans	Plug and abandon	Temporarily A	bandon			
Final Abandonment Notice	Convert to Injection	Plug back	Water Disposa	al			
Attach the Bond under which the following completion of the involtesting has been completed. Final determined that the site is ready for	ctionally or recomplete horizontally, work will performed or provide the wed operations. If the operation result Abandoninent, Notice shall be filed final inspection.) well will be put on beam put	Bond No on file was in a multiple come only after all requi	on the BLM/ BIA Requipletion or recompletion in the rectain rements, including rectain	nred subsequent in a new interval,	reports shall be filed within 30 day, a Form 3160-4 shall be filed one en completed, and the operator ha		
					RCVD JUN 29'09		
					OIL CONS. DIV.		
					DIST. 3		
14 I hereby certify that the foregoing is Name (Printed/ Typed)	true and correct						
IRENE 7	TRUJILLO	Title	OPER.	ATIONS TE	CHNICIAN		
Signature Line	hujillo	Date	Date 7/16/2009				
	THIS SPACE FOR F	EDERAL OR	STATE OFFICE U	SE			

NMOCD 657/

Approved by

Conditions of approval, if any are attached Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon