ke

	UNITED STATES DEPARTMENT OF THE INTERIO	11 11/4 00 20 / 11 111	FORM APPROVED OM B No 1004-0135 Expires: January 31, 2004
	BUREAU OF LAND MANAGEMEN	(1	5. Lease Serial No.
Do not use ti	NOTICES AND REPORTS his form for proposals to drill o cell. Use Form 3160-3 (APD) for	r to reëntëran 🖾 🔾	2.5. \$6. If Indian, Allottee or Tribe Name
SUBMIT IN TR	7. If Unit or CA/Agreement, Name and/or No		
1. Type of Well  ☐ Oil Well ☐ ☐	8. Well Name and No.		
2. Name of Operator SAGEBRUS	9. API Well No.		
3a. Address HC 78 BOX 21 REGINA, NM 87046  3b. Phone No. (include area code) 575-638-9137			3098432014 30-643-70143  10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			SAN LUIS MESAVERDE
/980' FSL & 2310 FEL SEC. 21 T. 18N R.3 W			11 County or Parish, State
	SANDOVAL, NM		
12. CHECK A	PPROPRIATE BOX(ES) TO INDICAT	E NATURE OF NOTICE,	REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TYPE OF ACTION	
Notice of Intent	Acidize Deepen Alter Casing Fracture	r <del>1</del>	Start/Resume) Water Shut-Off Well Integrity
Subsequent Report		onstruction Recomplete	Other EXTENSION
Final Abandonment Notice	Change Plans Plug an Convert to Injection Plug Ba	d Abandon Temporarily ack Water Dispos	
If the proposal is to deepen dur Attach the Bond under which the following completion of the intesting has been completed. For determined that the site is read: REQUEST PERMISSION BECAUSE OF NESSAR' CHANCE TO CONTINU LETTER FROM NEIL P	ectionally or recomplete horizontally, give substitute work will be performed or provide the Bond volved operations. If the operation results in a minal Abandonment Notices shall be filed only affly for final inspection.)  N FOR A NEED FOR AN EXTENSION OF RADIATION TREATMENT DURING TRADIATION TREATMENT DURING TO RECOVER MENTALY & PHYLORATEL, MD RECOMMENDING THAT	urface locations and measured and No. on file with BLM/BIA Requilitiple completion or recompletion and requirements, including reclar all requirements, including reclar at the NEXT SIX WEEKS, 5 CALY RESULTING FROM OPLUGGING OPERATIONS	
			DAIR YIBI 4 614 A
			RCVD JUN 14'10
			OIL CONS. DIV.
			DIST. 3
14. Thereby certify that the fore Name (Printed/Typed)	egoing is true and correct	l	
BETH CHARL	ES	Title PRESIDENT	
Signature S	Charles	Date 06/06	/10
	THIS SPACE FOR FEDERA	AL OR STATE OFFIC	
	• • •		JUN 1 1 2010

which would entitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to anymatter within its jurisdiction

(Instructions on page 2)

Approved by Original Signed: Stephen Mason
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



Title

Office



The Cancer Center at Presbyterian 8300 Constitution Ave. NE, Building D

Albuquerque, NM 87110 Phone: (505) 559-6100 Fax: (505) 559-6101

www.phs.org

Bureau of Land Management Farmington Field Office 1235 La Plata Highway Farmington, NM 87401 Stephen Mason

Ms. Hand needs further radiation treatment for the next 6 weeks, 5 days a week. She will be required to come to the cancer center daily for 6 weeks. It is my opinion that all plugging operations be suspended until the radiation treatments are completed so she may come to the cancer center. The extension of time will allow the radiation treatments to be given.

Yours Sincerely,

Neil Patel/MD