Form 3160-5 (April 2004)

## UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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FORMAPPROVED	
OM B No 1004-0137	
Expires March 31, 2007	

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SF 078384
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6. If Indian, Allottee or Tribe Name

SORMII IN TRI	PLICATE - Other i	instructions of rea	erse side.	7. If Unit o	r CA/Agreement, Name and/or No.
1. Type of Well Oil Well	【 Gas Well ☐ Otl	her UIN	25 2010	8. Well Nan	
				NEWSO	
2. Name of Operator HEP OIL GP, LLC		Numeau of	Land Management	9. API Well	
3a. Address		3b. Phone No. Inc.	Land Managament ton Field Office ude area code) 4373	30-045-2	24505
P.O. BOX 1499 GAINES'		100 (040)000	4373		d Pool, or Exploratory Area
4. Location of Well (Footage, Sec		- ·			D PICTURED CLIFFS (GA
1850' FSL & 790' FWL, S	SECTION 5, R26N-I	R8W		SAN JUA NEW ME	•
12. CHECK AF	PPROPRIATE BOX(ES	S)TO INDICATE NAT	URE OF NOTICE, R	EPORT, OR	OTHER DATA
TYPE OF SUBMISSION		٦	YPEOF ACTION		
Notice of Intent  Subsequent Report	Acidize AlterCasing X Casing Repair	Deepen FractureTreat New Constructi	X Production (Sta	art/Resume)	Water Shut-Off Well Integrity Other
Final Abandonment Notice	Change Plans Convert to Injectio	Plug and Abandon Plug Back	:		
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(Instructions on page 2)

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JUN 25 2010

