Form 3160-5 (Septer

UNITED STATES

FORM APPROVED

-	DEPARTMENT OF THE IN	OMB No. 1004-0135 Expires: January 31, 2004			
BUREAU OF LAND MANAGEMENT				5. Lease Serial No.	
SUNDRY NOTICES AND REPORTS ON WELLS				Jic 459	
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Alle	ottee or Tribe Name
aballuolleu we	CH. 0301 01111 0100-0 (A1 D)			Jicarilla Apacl	ne
SUBMIT IN TRIPLICATE - Other instructions on reverse side 💥 🗯 🎏				7. If Unit or CA	/Agreement, Name and/or No.
1. Type of Well	Water Control of the			N/A	
Oil Well Gas Well Other				8. Well Name and No.	
2. Name of Operator				Jicarilla 459 #4	
Mallon Oil Company, an indirect wholly-owned subsidary of Black Hills Expl				9. API Well No.	
3a. Address		3b. Phone No. (include area code)		30-039-24307	
350 Indiana St., #400, Golden, CO 80401		720-210-1300		10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., 790' FNL and 1850' FEL (NWN)				Cabresto Canyon; Tertiary 11. County or Parish, State	
				Rio Arriba, N	М
12. CHECK AP	PROPRIATE BOX(ES) TO			PORT, OR O	THER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
	Acidize	Deepen	Production (Start/	Resume)	Water Shut-Off
Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplete		Other
	Change Plans	Plug and Abandon	Temporarily Abar	ndon	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
following completion of the investing has been completed. Fin determined that the site is ready Mallon Oil Company, an indiret valorities on 6/3/03.	the work will be performed or provivolved operations. If the operation report of the operation of	de the Bond No. on file esults in a multiple comfiled only after all requi	e With BLM/BIA. Required spletion or recompletion in irements, including reclam	a subsequent repo a new interval, a ation, have been of temporarily aba	rts shall be filed within 30 days Form 3160-4 shall be filed once completed, and the operator has
 14. 1 hereby certify that the foregoin Name (PrintedlTyped) 	ng is true and correct				
Allison Newcomb		Title E	Engineering Technician		
Signature allum	. Yewcomb	Date d	2/5/04		
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by (Signature)	Adam M. Salame	h Div	ision of Multi-R	esources	,
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to compare the conditions of t	attached. Approval of this notice all or equitable title to those rights conduct operations thereon.	does not warrant or	Office		FEB 1 7 2004

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 any matter within its jurisdiction.