Form 3160-5 (August, 1999)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135

OWID	INO.	1004	-013	, ,
F	. 7		3.0	

Conditions of approval, if any, are attached. Approval of this notice d	Oes not warrant or	Date 9 2 9 3 2		
Approved by	77.3	Date 3/26/52		
THIS SPACE FOR FED	ERAL OR STATE OFF			
Signature C. A. C. Lice		Date November 28, 2000		
Carla Christian	T	Title Regulatory Technician		
14. I hereby certify that the foregoing is true and correct Name (PrintedTyped)				
		12 <del>5</del>		
4. Test was witnessed by Kevin Schnider w/Far	<u> </u>			
3. We request a continuance of a T/A status on	this well.			
moved up to 560 psi. Good test. POOH w/pkr 8	tbg. Pack off wellhead.	s. Fressure @ start or test 550 psi,		
<ol> <li>MIRU well service unit. RIH w/5 1/2" pkr &amp; 2</li> <li>RU pump truck. Load &amp; pressure csg to 550</li> </ol>				
-				
2-11-02 THIS APPROVA	L EXPIRES APR			
determined that the site is ready for final inspection.)		- 4		
following completion of the involved operations. If the operation results testing has been completed. Final Abandonment Notices shall be file.	in a multiple completion or recompleti d only after all requirements, including	ion in a new interval, a Form 3160-4 shall be filed once greclamation, have been completed and the operator has		
If the proposal is to deepen directionally or recomplete horizontally, given Attach the Bond under which the work will be performed or provide the	Bond No. on file with BLM/BIA. R.	equired subsequent reports shall be filed within 30 days		
13 Describe Proposed or Completed Operation (clearly state all pertinent de	etails, including estimated starting date	of any proposed work and approximate duration thereof.		
Final Abandonment Notice Convert to Injection	Plug Back Water D	Disposal		
Change Plans	Plug and Abandon Tempor	rarily Abandon MIT Test		
X Subsequent Report Casing Repair	New Construction Recomp			
Altering Casing	Fracture Treat Reclam			
Notice of Intent Acidize		<u> </u>		
TYPE OF SUBMISSION	TYPE OF ACTION			
12. CHECK APPROPRIATE BOX(ES) TO INDICA	TE NATURE OF NOTICE.			
000 1 0L & 100 FVVL, 086. 0-2014-/VV	Rio Arriba Co., New Mexico			
390' FSL & 735' FWL, Sec. 8-26N-7W	11. County or Parish, State			
	Basin Fruitland Coal (Gas)			
4 Location of Well (Footage, Sec., T., R., VI., or Survey Description)	1 12 12 12 12 12 12 12 12 12 12 12 12 12			
3a. Address Suite: 600 3b. Phone No. (include area coordinates) 405-749-1309 405-749-1309		10. Field and Pool, or Exploratory Area		
LOUIS DREYFUS NATURAL GAS CORP.  3a. Address Suite, 600	Izh Phasa Na (tail )	30-039-25242		
·		9. API Well No.		
2. Name of Operator		MKL 14-8		
Dil Well X Gas Well Other	PS 2002	8. Well Name and No.		
1. Type of Well	FEB 2002	om of the greenent raine and of the		
SUBMIT IN TRIPLICATE - Other Instructi		7. If Unit or CA/Agreement, Name and/or No.		
Do not use this form for proposals to drill abandoned well. Use Form 3160-3 (APD) is	6. If Indian, Allottee or Tribe Name			
SUNDRY NOTICES AND REPORT	NMSF-079162			
	5. Lease Serial No.			
Botte of Entre Minimite	TAITTAI	Expires: November 30, 2000		

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, 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 fraudulent statements or representations as to any matter within its jurisdiction.

which would entitle the applicant to conduct operations thereon.