

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: November 30, 2000

**SUNDRY NOTICES AND REPORTS ON WELLS**

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE - Other instructions on reverse side**

|  |  |
|--|--|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | 5. Lease Serial No.<br><b>NM-021126</b>                            |
| 2. Name of Operator<br><b>Taurus Exploration, U.S.A., Inc.</b>   | 6. If Indian, Allottee or Tribe Name                               |
| 3a. Address<br><b>2198 Bloomfield Highway; Farmington, NM 87401</b>  | 7. If Unit or CA/Agreement, Name and/or N                          |
| 3b. Phone No. (include area code)<br><b>505-874-0100</b>   | 8. Well Name and No.<br><b>Nye Federal 1B</b>                      |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br><b>1950' FSL, 2190' FEL, Sec. 20, T31N, R12W; NMPM</b> | 9. API Well No.<br><b>30-045-30891</b>                             |
|  | 10. Field and Pool, or Exploratory Area<br><b>Blanco Mesaverde</b> |
|  | 11. County or Parish, State<br><b>San Juan NM</b>                  |

**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

| TYPE OF SUBMISSION                                    | TYPE OF ACTION   |
|---|--|
| <input type="checkbox"/> Notice of Intent             | <input type="checkbox"/> Acidize <input type="checkbox"/> Deepen <input type="checkbox"/> Production (Start/Resume) <input type="checkbox"/> Water Shut-Off                      |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing <input type="checkbox"/> Fracture Treat <input type="checkbox"/> Reclamation <input type="checkbox"/> Well Integrity                       |
| <input type="checkbox"/> Final Abandonment Notice     | <input type="checkbox"/> Casing Repair <input type="checkbox"/> New Construction <input type="checkbox"/> Recomplete <input checked="" type="checkbox"/> Other <u>set casing</u> |
|   | <input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon   |
|   | <input type="checkbox"/> Convert to Injection <input type="checkbox"/> Plug Back <input type="checkbox"/> Water Disposal   |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

01/07/02 Ran 66 jts. 7" 20# J-55 ST&C casing, set @ 2916'. RU Halliburton. Cement with 300 sks 65/35 Class B poz. 10#/sk gilsonite, 1/4#/sk flocele, 6% gel, 2% CaCl2 followed with 100 sks 50/50 Class B poz. 10#/sk gilsonite, 1/4#/sk flocele, 2% CaCl2 (720 cu.ft.). Plug down @ 10:15 pm 01/07/02. Circulated 30 sks cement to surface. RD Halliburton. WOC. NU BOP. Test BOP & casing to 1200 psi - ok.

|  |                                      |
|--|--------------------------------------|
| 14. I hereby certify that the foregoing is true and correct<br>Name (Printed/Typed)<br><b>Vicki Donaghey</b> | Title<br><b>Production Assistant</b> |
| <i>Vicki Donaghey</i>  | Date <b>01/09/02</b>                 |

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

|   |        |      |
|---|--------|------|
| Approved by   | Title  | Date |
| 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. | Office |      |

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.

NMOCD