

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007**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 <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. LC 063965
2. Name of Operator SDG Resources L. P.		6. If Indian, Allottee or Tribe Name
3a. Address P. O. Box 1390 Montrose, CO 81401	3b. Phone No. (include area code) 432.550.7580	7. If Unit or CA/Agreement, Name and/or No. Cooper Jal Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990 Feet From The SOUTH Line and 990 Feet From The EAST Line, Section 24, Township 24S Range 36E.		8. Well Name and No. 136
		9. API Well No. 30 025 09640
		10. Field and Pool, or Exploratory Area JALMAT:
		11. County or Parish, State LEA

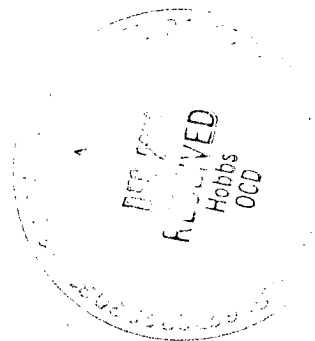
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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 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 Tagged Fill and Hydrotest Tubing.
	<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 recomplete 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 recompletion 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 site is ready for final inspection.)

Objective: Tagged Fill and Hydrotest Tubing.

1. Rigged up Pulling Unit on 2/05/94.
2. Pulled rods, pump and tubing.
3. Hydrotest 2 7/8" tubing and replaced one bad joint.
4. RIH with pump and rods.
5. Placed well on production.
6. 2/20/94: Pump 39 oil, 25 water, 21 mcf.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Domingo Carrizales		Title Sr. Petroleum Engineer	
Signature <i>Domingo Carrizales</i>		Date 11/08/2004	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved by (ORIG. SGD) DAVID R. GLASS DEC 1 2004		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 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.			
(Instruction on page 2) PETROLEUM ENGINEER			

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☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator **SDG Resources L. P.**3a. Address
P. O. Box 1390 Montrose, CO 814013b. Phone No. (include area code)
432.550.7580

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

990 Feet From The SOUTH Line and 990 Feet From The EAST Line, Section 24, Township 24S Range 36E.5. Lease Serial No.
LC 063965

6. If Indian, Allottee or Tribe Name

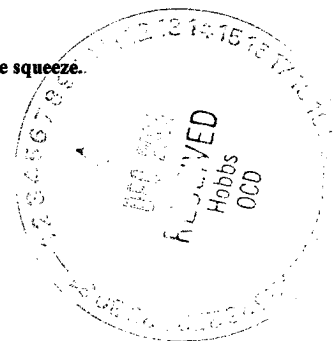
7. If Unit or CA/Agreement, Name and/or No.
Cooper Jal Unit8. Well Name and No.
1369. API Well No.
30 025 0964010. Field and Pool, or Exploratory Area
JALMAT:11. County or Parish, State
LEA**12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA**

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<input 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 Repair Rod Part and
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Acidize Perfs with
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	2,000 gals 15% Acid.

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 recomplete 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 recompletion 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 site is ready for final inspection.)

Objective: Repair rod part and acidize perforations with 2,000 gallons 15% NEFE HCl acid, performed scale squeeze.

1. Rigged up Pulling Unit on 8/07/97.
2. Pulled rods, pump and tubing (replaced parted rod).
3. Acidized perfs 3,013' to 3,177' with 2,000 gallons 15% NEFE HCl acid.
4. Performed scale squeeze on perforations.
5. RIH with pump and rods.
6. Placed well on production.
7. 8/25/97: Pump 27 oil, 35 water, 12 mcf.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)**Domingo Carrizales**Title **Sr. Petroleum Engineer**

Signature

Date

11/08/2004**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

(ORIG. SGD.) DAVID R. GLASS

Title

Date

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Office

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(Instructions on page 2)

PETROLEUM ENGINEER

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2. Name of Operator SDG Resources L. P.		6. If Indian, Allottee or Tribe Name
3a. Address P. O. Box 1390 Montrose, CO 81401		7. If Unit or CA/Agreement, Name and/or No. Cooper Jal Unit
3b. Phone No. (include area code) 432.550.7580		8. Well Name and No. 136
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990 Feet From The SOUTH Line and 990 Feet From The EAST Line, Section 24, Township 24S Range 36E.		9. API Well No. 30 025 09640
		10. Field and Pool, or Exploratory Area JALMAT:
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<input 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 Inspect Tubing and Rods.
	<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	

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Objective: Inspect Tubing and Rod string.

1. Rigged up Pulling Unit on 9/02/98.
2. Pulled rods, pump and tubing.
3. Inspect Tubing and Rods (Replaced 77 joints of 2 7/8" Tubing and Rod boxes.
4. RIH with pump and rods.
5. Placed well on production.
6. 9/15/98: Pump 10 oil, 20 water, 6 mcf.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Domingo Carrizales		Title Sr. Petroleum Engineer	
Signature <i>Domingo Carrizales</i>		Date 11/08/2004	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved by (ORIG. SGD) DAVID R. GLASS		Title	Date
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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.			
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4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 990 Feet From The SOUTH Line and 990 Feet From The EAST Line, Section 24, Township 24S Range 36E.		9. API Well No. 30 025 09640
		10. Field and Pool, or Exploratory Area JALMAT:
		11. County or Parish, State LEA

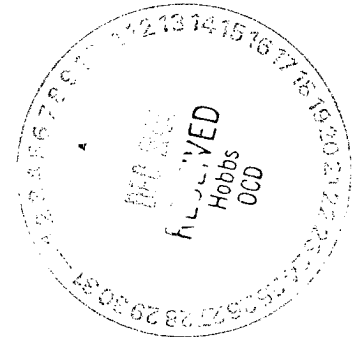
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<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Change out Pump.
	<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	

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Objective: Change out Pump.

1. Rigged up Pulling Unit on 8/03/99.
2. Pulled rods and pump.
3. Changed out pump..
4. RIH with pump and rods.
5. Placed well on production.
6. 8/17/99: Pump 19 oil, 5 water, 10 mcf.



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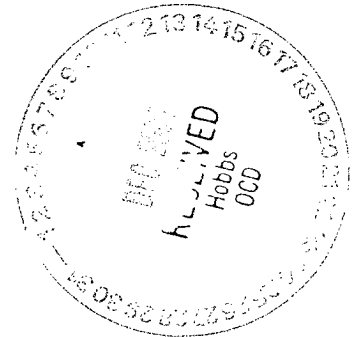
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<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Acidize and Scale
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Squeeze Perforations
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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Objective: Acidize and Scale squeeze Perforations.

1. Rigged up Pulling Unit on 10/18/00.
2. Pulled rods and pump.
3. Acidized perforations with 2,000 gallons 15% NEFE HCl acid.
4. Squeezed perforations with 1 drum of scale (TH 793).
5. RIH with pump and rods.
6. Placed well on production.
7. 10/18/00: Pump 10 oil, 37 water, 21 mcf.



14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Domingo Carrizales		Title Sr. Petroleum Engineer	
Signature <i>Domingo Carrizales</i>		Date 11/08/2004	
ACCEPTED FOR THIS SPACE FOR FEDERAL OR STATE OFFICE USE			
Approved by (ORIG. SGD.) DAVID R. GLASS		Title	
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SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator **SDG Resources L. P.**

3a. Address
P. O. Box 1390 Montrose, CO 81401

3b. Phone No. (include area code)
432.550.7580

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

990 Feet From The SOUTH Line and 990 Feet From The EAST Line, Section 24, Township 24S Range 36E.

5. Lease Serial No.

LC 063965

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

Cooper Jal Unit

8. Well Name and No.

136

9. API Well No.

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10. Field and Pool, or Exploratory Area

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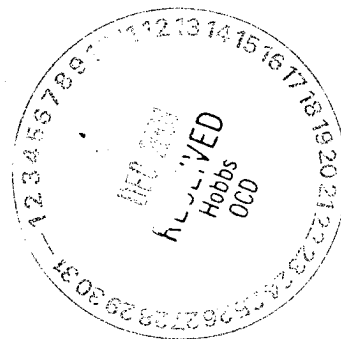
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<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Change out Pump.
	<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	

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Objective: Change out Pump.

1. Rigged up Pulling Unit on 01/03/02.
2. Pulled rods and pump.
3. Pumped 10 gallons parafin solvent down tubing.
5. RIH with pump and rods.
6. Placed well on production.
7. 01/03/02: Pump 6 oil, 26 water, 21 mcf.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Domingo Carrizales

Title **Sr. Petroleum Engineer**

Signature

Domingo Carrizales

Date

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