Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 200

Э.	Lease	Seriai	NO

NM-14777

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.

6. If Indian, Allottee or Tribe Name

SUBMIT IN TR	IPLICATE - Other instru	ctions on reverse	affe C	7. If Unit or CA	A/Agreement	, Name and	i/or No.
1. Type of Well			PEINED	34375			-
	Other		SEP 1 5 200	8. Well Name	and No.		
2. Name of Operator		66	W-Mary 2005	Pierce Crossi	ng 35 Fed (Com #1	
Mewbourne Oil Company 147-	44		U-MITEOLO	9. API Well N			
3a. Address		3b. Phone No. (include	area code)	30-015-3368	8		
PO Box 5270 Hobbs, NM 88	240	505-393-5905		10. Field and P	ool, or Explo	ratory Area	a
4. Location of Well (Footage, Sec.,		303-373-3703		Owen Mesa	Atoka 823°	70	
Zetanen ez wen (t eenage, eee.,	2, 20, 20, 0. 00. 20, 20, 200.			11. County or F	Parish, State		
1400' FNL & 660' FEL, Sec 35-	T24S-R29E Unit Letter H						
				Eddy Co NM	1		
12. CHECK API	PROPRIATE BOX(ES) TO	INDICATE NATUR	E OF NOTICE, RI	EPORT, OR C	THER DA	ATA	
TYPE OF SUBMISSION		TY	PE OF ACTION				
	Acidize [Deepen	Production (Start	/Resume)	Water Shu	ıt-Off	
Notice of Intent	Alter Casing	Fracture Treat	Reclamation	Í	Well Integ	rity	•
71.01	Casing Repair	New Construction	Recomplete	$\overline{\nabla}$	Other Co	ment job	and
Subsequent Report	Change Plans	Plug and Abandon	Temporarily Aba	ındon	TOC —	<u>-</u> -	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal				
determined that the site is ready As per Notice of Written Order a Zakarie with BLM Carlsbad offi	#05-PE-217: On 08/29/05, MCice). If you have any questions,	OC removed 16' tanks a	nd replaced with 8' tar		·		
14. 1 hereby certify that the foregoin Name (PrintedlTyped)	g is true and correct	J			·		
Kristi Green	_	Title Ho	bbs Regulatory				
Signature Signature	t green	Date 09	06/05			, "	
A COMMUNICATION OF THE STATE OF	THIS SPACE FO	DR FEDERAL OR ST	100				
Approved by (Signature)	/s/ Joe G. Lara	Na (Pri	me nted/Sped/Joe G. La	ıra _{Tit}	le		
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to contain the container.	il or equitable title to those rights	does not warrant or Of	fice		EE Date	SEP 1	3 2005
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	tle 43 U.S.C. Section 1212, make int statements or representations as	t a crime for any person k to any matter within its ju	nowingly and willfully trisdiction.	to make to any de	partment or a	agency of th	ne United

х	RECL
	ISECFORM 15
Certified Mail - Return Receipt Requested	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT
70042890000212761502	NOTICE OF WRITTEN ORDER

	Page	1	of	1	
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D					
ease	NM1477	7			
A					

05-PE-217

	IDENTIFICATION	
IID		
Lease	NM14777	
CA		
Unit		
PA		

Number

								I PA		
Bureau of Land Manager	nent					Operator	-			
•	CAR	LSBAD FII	ELD	OFFICE		Mewbou	rne Oil Company			
Address	620]	EAST GREE	EN S	STREET		Address P.O Box	Address P.O Box 5270 Hobbs, NM 88240			
	CAF	LSBAD, N	M 8	8220						
Inspector			Telep	hone		Attention				
Evans				(505) 234-5	977					
Site Name Pierce Crossing 35 Fed		Well or Facili	ity	1/4 1/4 Section SENE 35	Township 24S	Range 29E	Meridian NMP	County Eddy	State NM	
Site Name		Well or Facili	ity	1/4 1/4 Section	Township	Range	Meridian NMP	County Eddy	State NM	
Site Name		Well or Facili		1/4 1/4 Section	Township	Range	Meridian NMP	County	State NM	
	The fo	ollowing condit	ion(s) were found by Bur	eau of Land Man	agement Inspectors on	the date and at the site	(s) listed above.		
Date	(2	Time 4-hour clock)		Corrective Action Completed b		Date Authority Reference		nce		
07/19/05		0905		8/23/05		43 CFR 3161.2 & 43 CFR 3162.5		FR 3162.5-1		
Remarks:						9 /				

As to your APD VRM stipulations all above ground facilities are to be low profile $(6^{\circ}-6^{\circ})$ remove tall tanks and install low profile tanks.

When the Written Order is complied with, sign this notice and return to above address! Company Representative Title 51. 1700s Eng Signature Signature	Date 8-29-05
Company Comments	

WARNING

The Authorized Officer has authority to issue a Written Order in accordance with 43 CFR 3161.2. Written Order correction and reporting time frames begin upon receipt of this Notice or 7 business days after the date it is mailed, whichever is earlier. Each stipulation must be corrected within the prescribed time from receipt of this Notice and reported to the Bureau of Land Management office at the address shown above. If you do not comply as noted above under "Corrective Action To Be Completed By", you shall be issued an Incident of Noncompliance (INC) in accordance with 43 CFR 3163.1(a). Failure to comply with the INC may result in assessments as outlined in 43 CFR 3163.1 and may also incur civil penalties (43 CFR 3163.2). All self-certified corrections must be postmarked no later than the next business day after the prescribed time frame for correction.

Section 109(d)(1) of the Federal Oil and Gas Royalty Management Act of 1982, as implemented by the applicable provisions of the operating regulations at Title 43 CFR 3163.2(f)(1), provides that any person who "knowingly or willfully" prepares, maintains, or submits false, inaccurate, or misleading reports, notices, affidavits, records, data, or other written information required by this part shall be liable for a civil penalty of up to \$25,000 per violation for each day such violation continues, not to exceed a maximum of

REVIEW AND APPEAL RIGHTS

A person contesting a decision shall request a State Director review of the Written Order. This request must be filed within 20 working days of receipt of the Notice with the appropriate State Director (see 43 CFR 3165.3). The State Director review decision may be appealed to the Interior Board of Lands Appeals, 801 North Quincy Street, Suite 300, Arlington, VA 22203 (see 43CFR 3165.4). Contact the above listed Bursay of Land Management office for further information

Signature of Bureau of Land Management Authorized Officer Date Time								
FOR OFFICE USE ONLY 02/19/05 1410								
Number	Date	Assessment Penalty	Termination	Type of Inspection				