Form 3160-5

UNITEDSTATES

FORMAPPROVED

APPROVED FOR /2 MONTH PERIOD ENDING_6/14/07

DEPARTMENT OF THE	E INTERIOR OC	D-ARTESLA	OM B No. 1004-0137 Expires: March 31, 2007
BUREAU OF LAND MA	NAGEMENT		5. Lease Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS			NMLC 069627-A
			6. If Indian, Allottee or Tribe Name
PLICATE - Other ins	7. If Unit or CA/Agreement, Name and/or No. NMNM 71016		
1. Type of Well Gas Well Other RECEIVED			8. Well Name and No.
	JUN	1 6 2006	Poker Lake Unit #234
	25 DhamaNa (1974)	MATERIA	9. API Well No. 30-015-34311
Tv 79702	· ·	·	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Nash Draw (Delaware, BS, Avaion Sand
NWNE, 330' FNL, 2400' FEL Sec 31, T24S, R30E Mer NMP			11. County or Parish, State Eddy NM
PPROPRIATE BOX(ES)T	O INDICATE NATUR	E OF NOTICE, R	EPORT, OR OTHER DATA
TYPE OF ACTION			
Acidize AlterCasing	Deepen FractureTreat	Production (Sta	Well Integrity
	<u> </u>		X Other Extension
I — -		_ ` `	
Convert to Injection	☐ Plug Back	☐ Water Disposal	
ted Operation (clearly state all p	ertinent details, including es	timated starting date of	any proposed work and approximate duration thereof. rue vertical depths of all pertinent markers and zones.
	NOTICES AND RELISES FORM TO PROPRIATE BOX(ES)T NOTICES AND RELISES FORM 3160-3 PLICATE - Other ins Other Other Acidize	NOTICES AND REPORTS ON WELL sis form for proposals to drill or to re-elell. Use Form 3160-3 (APD) for such pro PLICATE - Other instructions on revers Gas Well Other 3b. PhoneNo. (included) 1, Tx 79702 (432)683-222 1c., T., R., M., or Survey Description) FEL NMP PPROPRIATE BOX(ES)TO INDICATE NATUR Acidize Deepen AlterCasing FractureTreat Casing Repair New Construction Change Plans Plug and Abandon	NOTICES AND REPORTS ON WELLS sis form for proposals to drill or to re-enter an cell. Use Form 3160-3 (APD) for such proposals. PLICATE - Other instructions on reverse side. Gas Well Other PLOTE JUN 1 6 2006 3b. Phone No. (include area bodie) 1, Tx 79702 (432)683-2277 c., T., R., M., or Survey Description) FEL TYPE OF ACTION Acidize

I hereby certify that the foregoing is true and correct Name (Printed/Typed) **Annette Childers** Title Administrative Assistant Signature 05/05/2006 Date THIS SPACE FOR FEDERAL OR STATE OFFICE USE Is/ Tony J. Herrell JUN 1 3 2006 Approved by 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 CARLSBAD FIEL which would entitle the applicant to conduct operations thereon.

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.