Form 3160-5 (September 2001)

## UNITED STATES DEPARTMENT OF THE INTERIOR BURGALLOG LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-013330 31
OMB No. 1004-013330 31 Expires: January 3 4, 2004

SUNDRY NOTICES AND REPORTS ON WELLS					15 0 All A	
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, All	ottes or Tries Name		
	PLICATE - Other instru	etions on reve	seside.	7. If Unit or CA	Agreement, Name and or No.	
1. Type of Well ☐ Oil Well ☐ Gas Well ☐	) Other			8. Well Name a	and No. 6/8/21919191	
2. Name of Operator	Other			Milagro 28 Fe	deral Com #1	
•	744			9. API Well No		
3a. Address		3b. Phone No. (inc	lude area code)	30-015-35012		
PO Box 5270 Hobbs, NM 88240 505-393-5905				10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)				Happy Valley Morrow		
1500' FNL & 990' FWL Unit E Sec 28-T22S-R26E					11. County or Parish, State  Eddy County, NM	
12. CHECK APP	PROPRIATE BOX(ES) TO	INDICATE NAT	TURE OF NOTICE, F	REPORT, OR O	THER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION			
☐ Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (State Reclamation	rt/Resume)	Water Shut-Off Well Integrity Other Chlorides	
Subsequent Report	Casing Repair	New Construction	<u> </u>	<b>₩</b>	Other Chlorides	
Final Abandonment Notice	Change Plans Convert to Injection	☐ Plug and Abando ☐ Plug Back	on			
determined that the site is ready for the Chloride levels from samples obtained to the control of a sound of a sound of a sound of the chloride levels from samples obtained to the control of the chloride samples of the control of the chloride samples obtained samples of the chloride samples obtained samples obta	rained from the flowline as per  MG/L 200' @ 2400 MG/L  Ito 1417' with BLM (Jerry Bla	akey) approval. Ce	ACCEPTED  AUG  ALEXIS O	dated 07/10/06. If	you have any questions,	
14. 1 hereby certify that the foregoing Name (PrintedlTyped)	g is true and correct					
Kristi Green		Title	Hobbs Regulatory			
Signature Souti	green	Date	07/27/06			
	THIS SPACE FO		STATE OFFICE USE			
Approved by (Signature)			Name (Printed/Typed)	Titl	e	
Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to co	l or equitable title to those rights	e does not warrant or s in the subject lease	Office		Date	

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.