

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

N.M. Oil Crops Division
811 S. 1st Street
Artesia, NM 88210-2834

FORM APPROVED
Bureau of Land Management
Expires March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.
Use "APPLICATION FOR PERMIT --" for such proposals.

SUBMIT IN TRIPLICATE

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. NM-0467934
2. Name of Operator Shahara Oil, LLC	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 207 W. McKay, Carlsbad, NM 88220 505-885-5433	7. If Unit or CA, Agreement Designation Grayburg Jackson PSU
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 330' FNL & 330' FWL, Unit D Section 27-T17S-R30E	8. Well Name and No. AD No. 12
	9. Well API No. 30-015-30342
	10. Field and Pool, or Exploratory Area GB Jackson, 7R-QN-GB San Andres
	11. County or Parish, State Eddy County, New Mexico

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input checked="" type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

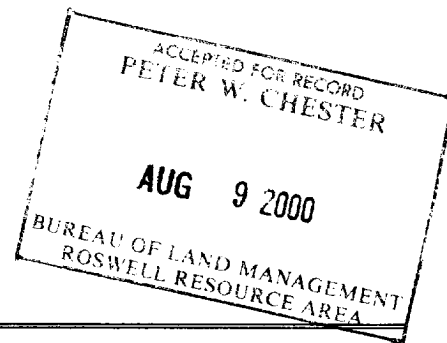
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this zone.)*

07/21/00 Spud well @ 5:30pm MDT

07/22/00 Drill. Run 11 jts plus 1 shot jt 8 5/8" 24# casing to 508'. Cement w/400 sx Class C w/2% CC. Circulated.

07/23 thru 07/26/00 Drill to TD 3500'.

07/27/00 RIH w/78 jts 5 1/2" 15.5# casing. Pumped 650 sx Halliburotn Lite w/5# salt, 1/4 FloCele, 425 sx C w/3# CFR-3, 5# Gilsomite, 1# salt, 3% LAP. Circulated 66 sx to pit. Plug down @ 4:00pm.



14. I hereby certify that the foregoing is true and correct

Signed Thallia Marshall Title _____ Date 08/03/00

(THIS SPACE FOR FEDERAL OR STATE OFFICE USE)

Approved By _____ Title _____ Date _____

Conditions of approval, if any:

Title 18 U. S. C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side

RECEIVED
AUG 05 2010
BLM
ROSWELL, NM