Form 3160-5 (August 1999)

Approved by

/s/ Brian W. Davis

## **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

## SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

FORM APPROVED OMB NO. 1004-0135 Expires: November 30, 2000

5. Lease Serial No.

Tract 251 Contract 154

6. If Indian, Allottee or Tribe Name

Date MAY

1 7 2001

abandoned well. Use Form 3160-3 (APD) for such proposals.		Jicarilla Apache
SUBMIT IN TRIPLICATE - Other instructions on reverse side		7. If Unit or CA/Agreement, Name and/or No
1. Type of Well Oil Well X Gas Well Other  2. Name of Operator Marathon Oil Company  3a. Address PO Box 2490 Hobbs, NM 88240  4. Location of Well (Footage, Sec., T., R., M., or Survey Des Sec. 34, T-26-N, R-5-W UL I, 1600' FNL & 900' FWL	3b. Phone No. (include area code) 505 393-7106 scription)	8. Well Name and No. Jicarilla Apache No. 16 DHC No. 2787 9. API Well No. 30-039-20529 10. Field and Pool, or Exploratory Area BD / MV / Otero Chacra  11. County or Parish, State Rio Arriba NM
12. CHECK APPROPRIATE E	OX(ES) TO INDICATE NATURE OF NOTICE, REP	
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent  X Subsequent Report  Final Abandonment Notice	Alter Casing Fracture Treat Reclamatic	te X Other
Attach the Bond under which the work will be performed following completion of the involved operations. If the testing has been completed. Final Abandonment No determined that the final site is ready for final inspection.  3/29 RU pulling unit. ND wellhead	te horizontally, give subsurface locations and measured and true vermed or provide the Bond No. on file with BLM/BIA. Required he operation results in a multiple completion or recompletion in a tices shall be filed only after all requirements, including reclamation.)  d. NU BOP. TOOH w/2 3/8" tbg.  ND BOP. NU wellhead. RIH w/pump & rods.	subsequent reports shall be filed within 30 days new interval, a Form 3160-4 shall be filed once
TAC at 5718' SN at 7306' Btm of tbg 7353'		MAY 2001
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	Title	
Kelly Cook	Admin.Assist	
Lever Cook	Date 4/30/01	
THIS	SPACE FOR FEDERAL OR STATE OFFICE USE	

Title