Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM	A APPR	OVED	
Budget But	ress No.	1004	-0132
Expires	March	31, 19	93
		Carial	NA

1	Budget Bureau No. 1004-
	Expires: March 31, 199
	5. Lease Designation and Serial

une 1990)	DEPARTMENT OF	THE INTERIOR	5. Lease Designation and Serial No.		
	BUREAU OF LANI	MANAGEMENT	NM 030555A		
			6. If Indian, Allottee or Tribe Name		
	SUNDRY NOTICES AND	REPORTS ON WELLS	6. II (BOILL, Allocate to		
Do not use this fo	A CONTRACTOR AS ACILL OF	to deepen of reentry to a different feet			
1	Use "APPLICATION FOR PE	RMIT—" for such proposals	7. If Unit or CA, Agreement Designation		
			7. If that of CA; Appendix 5		
	SUBMIT IN	TRIPLICATE	4		
			8. Well Name and No.		
. Type of Well Oil Gas Well Well	П.,		Five of Diamonds #2		
	☐ Other		9. AM Well No.		
2. Name of Operator	advation Corn		30 045 23427		
	oduction Corp.		10. Field and Pool, or Exploratory Area		
3. Address and Telephone	420, Farmington, NM	87499 (505) 325–1821	1		
P.O. BOX	age, Sec., T., R., M., or Sarvey Descript	iot)	Choke Cherry FR Sand		
t. Location of Well (POOL	1800' FWL (NE/4 SW/4	.)	San Juan, New Mexico		
1800, LPT %	. 10, T30N, R13W	•	Dan Same, sa		
Unit K, Sec	. 10, 1500, 1250		1 DATA		
	A DEPOSIT DOVAL	O INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA		
2. CHECK	(APPROPRIATE BUX(S) T	TYPE OF ACTION	<u> </u>		
	FSUBMISSION	TIPE OF ACTION			
		Abandonment	Change of Plans		
L. Notice	e of intent	Recompletion	New Construction		
er)		Plugging Back	Non-Routine Fracturing		
∠ Subse	quent Report	Casing Repair	Water Shut-Off		
		Altering Casing	Conversion to Injection		
L. Final	Abandonment Notice	Other Pool & P. at	Dispose Water (Note: Report results of multiple completion on We		
	1		The state of the s		
		the sand give persistent dates, including estimated date of start	ing any proposed work. If well is directionally disa		
13. Describe Proposed or	Completed Operations (Clearly state all per-	inent details, and give pertinent dates, including estimated date of start pths for all markers and zones pertinent to this work.)*	S		
give subserface i	OCEDOR 220 EXCEDENCE CON THE PROPERTY OF THE P	•	C:- ::		
			- - -		
			-		
			en de la companya de		
		the NMOCD, attached please fes the pool name as Choke (ind a plat (Form Cherry Fruitland		
Sand	(instead of Under	signated Fruitland).			
		مرا المسام ا	DEIMEN		
		<u>y</u> lau	BEIWEY		
			6 4 0 cens . /		
		יים עצי	6 1 8 1954 P.		
		0.03			
			Pelks bull		
			N 1 8		
			40 /04		
14. I hereby certify the	it the foregoing is true and correct	Vice-President	Dete12/12/94		
Simul Ass	1 John	Tide			
(This space for Po	State office are		-		
		Title	Date		
Approved by Conditions of appr	roval, if any:		EPTED FOR RECORD		
. –		a with the to make to any denartment or agency of the U	nited States any false, fictitious or fraudulent state		
Tide 18 U.S.C. Section	a 1001, makes it a crime for any person kr	sowingly and willfully to make to any department or agency of the U	DEC 1 5 1994		
or representations as to	o any matter within its jurisdiction.				
		F	ARMINGTON DISTRICT OFFICE		
		av .	San		

District # PG Bax 1900, Hobbs, NM \$8241-1900 District II PO Drawer DD, Artesia, NM \$8211-6719 District III 1000 Rio Brazos Rd., Aztec, NM 87410 District IV

State of New Mexico Energy, Minerals & Natural Resources Department

OIL CONSERVATION DIVISION PO Box 2088 Santa Fe, NM 87504-2088

Form C-102 Revised February 21, 1994 Instructions on back Submit to Appropriate District Office State Lease - 4 Copies Fee Lease - 3 Copies

PO Box 2008, Sa	ata Fe, NM		eii 16	_	NI ANID AC	PEACE DEDI	ra man n		AMENDED REPOR	
WEL API Number 30-045-23427				LOCATION AND ACREAGE DEI		······································	³ Pool Name			
⁴ Property	⁴ Property Code		*	Property Name F Diamonds			2° Well Number		2 Well Number	
'OGRID 0065		Duga	ın Prod	uction ('Operator Name uction Corp.			5706 GL		
					10 Surface	Location				
UL or lot so. K	Section 10	Township 30N	13W	Lot Ida	Feet from the 1800	North/South line South	Feet from the 1800	East/West I West	County San Juan	
			11 Bot	tom Hol	e Location	If Different Fro	om Surface			
UL or lot no.	Section	Township	Range	Lot Ida	Feet from the	North/South Ene	Feet from the	East/West I	line County	
¹² Dedicated Acr	es 13 Joint	or lafa 4	Coasolidatio	n Code 15 O	Order No.					
	VABLE V					ION UNTIL ALL SEEN APPROVED			N CONSOLIDATED	
16				b)E	BEN W		l hereby certi	ify that the infor	CERTIFICATION ormation contained herein is st of my knowledge and belief	
					EC 1 9 199		Jon	1 4	Tani	
					CON. I	DIV.	Signature Jim L Printed Nam	Jacobs	s	
							Title	Presider	nt ^{2 0}	
			Sec.	10			Date	2/94		
180	00'	-					I hereby certij was plotted fr or under my s	ify that the well i rom field notes o	CERTIFICATION location shown on this plat of actual surveys made by me d that the same is true and ief.	
							2/15/ Date of Surve	ey .	ssional Surveyer:	
		1800 	1				Origina	l survey	yed & signed by enhoover, L.S.	
i I							5979 Certificate Nu			
		•			_		Crunacia	moci		