

N. M. OIL CONS. COMMISSION
 P. O. BOX 1980
 HOBBS, NEW MEXICO 88240

Form 3160-5
 June 1990)

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 deepen or reentry to a different reservoir.
 Use "APPLICATION FOR PERMIT—" for such proposals

FORM APPROVED
 Budget Bureau No. 1004-0135
 Expires: March 31, 1993

5. Lease Designation and Serial No.

NM-83197

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation

8. Well Name and No.

Farrell Federal #11

9. API Well No.

30-041-10459

10. Field and Pool, or Exploratory Area

Chaveron San Andres

11. County or Parish, State

Roosevelt, NM

SUBMIT IN TRIPLICATE

1. Type of Well

Oil Well Gas Well Other

2. Name of Operator

Orbit Enterprises, Inc.

3. Address and Telephone No.

P. O. Box 476 Lovington, NM 88260-0476 (505)396-4914

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1980' FNL & 660' FEL, Sec 28, T7S, R33E

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input 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 type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>return to production</u>
	<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 work.)*

PULL AND REPLACE ALL THAT IS NEEDED TO
 RETURN TO PRODUCTION BY OCTOBER 7, 1995

JUL 3 8 24 AM 1995
 RECEIVED

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

Signed Joe Sanderson

Title Pres.

(This space for Federal or State office use)

Approved by _____
 Conditions of approval, if any:

Title _____

Date _____

ACCEPTED FOR RECORD Date JUNE 29, 1995
 PETER W. CHESTER

JUL 14 1995

BUREAU OF LAND MANAGEMENT
 FEDERAL RESOURCE AREA

16 U.S.C. Section 1001, makes 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.

*See instruction on Reverse Side