Form,3160-5 (March 2012)

(Instruction on page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR RURFALLOF LAND MANAGEMENT

FORM APPROVED	
Budget Bureau No. 1004-0137	
Expires: October 31, 2014	
5. Lease Serial No.	

BUREAU OF LAND MANAGEMENT		J. Lease Schai IV.			
CINYANA NORMORO AND BERONES	ON WHEEL E				
SUNDRY NOTICES AND REPORTS ON WELLS			6. If Indian, Allottee or Tribe Name		
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					
CLIPACE IN TRIPLICATE Other instruction	or such proposius.	· ** · · · ·	7 If Unit or CA Agr	gement Name and/or No : 5	
1. Type of Well SEP 2 5 2015			7. If Unit or CA, Agreement, Name and/or No.		
Oil Gas X INJECTION WELL			NM71021X		
	-		8. Well Name and No	SON UNIT #006	
2. Name of Operator	<u> </u>	ENED.	KULD SANDLIK	SON UNIT #000	
JR OIL LTD. CO.			9. API Well No.		
			30-025-04180		
3a. Address	3b. Phone No. (include at	rea code)	10 Field and Pool or	Evoloratory Area	
3500 ACOMA, HOBBS, NM 88240 575-390-1380			10. Field and Pool, or Exploratory Area EUMONT YATES 7R-QN (OIL)		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			·		
SEC. 3-T-20S-R36E, 1980' FNL & 660' FWL			11. County or Parish, State		
		LEA, NM			
12. CHECK APPROPRIATE BOX(es) TO INDIC	ATE NATURE OF	NOTICE	, REPORT, OR C	OTHER DATA	
	F ACTION				
Notice of Intent Acidize Alter Casing	Deepen Fracture Treat		ection (Start/Resume)	Water Shut-Off Well Integrity	
Notice of Intent Casing Casing Repair	New Construction		mplete	X Other	
Change Plans	Plug and Abandon		porarily Abandon	MIT	
Convert to Injection	Plug Back	Wate	r Disposal		
Final Abandonment Notice		V			
to deepen directionally or recomplete horizontally, give subsurface locations a work will be performed or provide the Bond No. on file with BLM/BIA. Req If the operation results in a multiple completion or recompletion in a new interfiled only after all requirements, including reclamation, have been completed,	uired subsequent reports shall rval, a Form 3160-4 must be fi	be filed within 3 lied once testing	30 days following completion has been completed. Final	on of the involved operations. Abandonment Notices must be	
Notified the OCD 24 hrs. prior to test.	•			• • • • • • • • • • • • • • • • • • •	
9/10/15 Tested well - Start 590#/End 580#. TP 8	350# (est). Held	30 min. O	K. Test was with	essed by Gilbert Cordera	
OCD (took copy of chart). Original chart attache	ed for BLM.				
9/11/15 Changed out surface bradenhead riser and				***	
		•	•	•	
_ ^			• •		
OCD-For Recon	d Only!			***	
11. I hereby certify that the foregoing is true and correct Name (Printed/Typed) DEBBIE MCKELVEY	Title AGENT		575-392-3575		
		17			
Signature Deblie 98 Kelver	Date	9121119	5		
THIS SPACE FOR FEDER	RAL OR STATE OFF	ICE USE			
Approved by	Title : ···		Date		
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify tha				,	
holds legal or equitable title to those rights in the subject lease which would entitle the applicant to operations thereon.	Conduct		.*	•	
<u> </u>	, Oille				
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for a Fictitious or fraudulent statements or representations as to any matter within its jurisdess.		lfully to make to	any department or agency	of the United States and false,	

FOR RECORD ONLY

PS 9/29/15-OCT 0 8 2015

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