UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

NMOCD Hobbs

FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an						NMNM0155	NMNM0155254D		
	abandoned wel		6. If Indian, Allottee or Tribe Name						
SUBMIT IN TRIPLICATE – Other instructions on reverse side							7. If Unit or CA/Agreement, Name and/or No		
1. Type of Well Oil Well Gas Well Other Dry							8. Well Name and No.		
	Oil Well Gas We	SHEARN FE	SHEARN FED. #1						
2. Name Of Operator),		
LEGACY RECLAMATION PROJECT							3004110010		
3a.	Address		3b. Phone	No. (include area	10. Field and Po	10. Field and Pool, or Exploratory Area			
. 1	N/A		N/A				BLUITT—SAN ANDRES		
4. 1	Location of Well (Footage, Sec	c., T., R., M., or Survey Des	cription)	DEC 0	11. County or I	11. County or Parish, State			
	SEC. 24, T. 08S., R. 36 E.	., NWNE 776FNL, 187	ROOSEVE	ROOSEVELT, NM					
	12. CHECK API	PROPRIATE BOX(ES) TO INDIC.	ATE NATURE	OF I	NOTICE, REPORT, O	R OTHI	ER DATA	
7	TYPE OF SUBMISSION	TYPE OF ACTION					74,3	1713	
	Notice of Intent	☐ Acidize	☐ Deep	pen		Production (Start/Resume)		Water Shut-Off	
		☐ Alter Casing	☐ Frac	ture Treat	\boxtimes	Reclamation		Well Integrity	
	Subsequent Report	Casing Repair	□ New	Construction	Recomplete		П	Other	
_	Subsequent report	Change Plans		and Abandon		Temporarily Abandon			
\boxtimes	Final Abandonment Notice	Convert to Injection							
	Described Proposed or Complete thereof. If the proposal is to decand zones. Attach the Bond un within 30 days following complete shall be filed once testing has been the operator has determined that BLM WILL INTERNAL RESTORATION HAS	epen directionally or recomp nder which the work will be letion of the involved operat een completed. Final Abanda the site is ready for final inst LLY GENERATE A S BEEN COMPLET	performed or prions. If the open comment Notices pection.)	y, give subsurface lo provide the Bond No eration results in a r shall be filed only a	ocation on one of the ocation o	ons and measured and true verifile with BLM/BIA. Requirable completion or recomplete all requirements, including response TO NO OPER	ertical depred subseton in a neclamation	oths of all pertinent markers quent reports shall be filed ew interval, a Form 3160-4 h, have been completed, and	
	I hereby certify that the foregoing Name (Printed/Typed)	ing is true and correct		Title	1	, ,			
	FORRE	SY MAYER		No	eli	ual Resource	e S	berealist	
	Signature (Auros)	Hayer	_	Date		116/15	7		
141	/ /	THIS SPACE	FOR FEDI	ERAL OR STA	TE	OFFICE USE		A STATE OF THE PARTY OF	
App	proved By Suc S	Suplex		Assi	4- 1	nt Field Manager,	Г	11/23/5	
or c	ditions of approval, if any, are ertify that the applicant holds leg	gal or equitable title to those i			ffice	ROSWELL FIELD	OFFIC	E	

Title 18 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.