OCD-ARTESIA

Form 3160-5 (September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0135

| | | Expires January 31, 20 |
|---|----|------------------------|
| į | 5. | Lease Serial No. |

| SUNDRY I Do not use this abandoned well. | ther CORP . 3b. 79 70 2 | ON WELLS or to re-enter an such proposals. is on reverse RECEIVED JUL 2 9 7004 | 5. Lease Serial No. NM-54428 6. If Indian, Allottee or Tribe Name 7. If Unit or CA/Agreement, Name and/or No. NORTH SQUARE LAKE UNIT 8. Well Name and No. NORTH SQUARE LAKE UNIT 9. API Well No. 30-015-32905 10. Field and Pool, or Exploratory Area SQUARE LAKE GB-SA 11. County or Parish, State | | | |
|---|--|--|---|--|--|--|
| 2630' FSL & 1310' | | | EDDY, NM | | | |
| 12. CHECK APPR | OPRIATE BOX(ES) TO IND | ICATE NATURE OF NOTICE, RE | EPORT, OR OTHER DATA | | | |
| TYPE OF SUBMISSION | | TYPE OF ACTION | | | | |
| Notice of Intent Subsequent Report | Casing Repair No. | eepen | □ Well Integrity ☑ Other Permit to | | | |
| Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.) Request for one-year extension for drilling permit North Square Lake Unit No. 175 located 2630' FSL & 1310' FWL Lot 3 Sec. 31 Tl6S R31E | | | | | | |
| | APPROVED FOR 12 MONTH PERIOD | | | | | |
| | | ENDING | 7/8/05 | | | |
| 14. I hereby certify that the foregoing is Name (Printed/Typed) | rue and correct | | | | | |
| M. A. Sirgo, If | 1/1 | Title Engineer | | | | |
| Signature | JUSG D | Date JULY 19, 20 | 0 4 | | | |
| | THIS SPACE FOR FE | DERAL OR STATE OFFICE USE | | | | |
| | | CTNOFIELD MANAGE | ER Date JUL 2 7 2004 | | | |
| Conditions of approval, if any, are attack certify that the applicant holds legal or which would entitle the applicant to condu- | equitable title to those rights in the | cubiect leace | AD FIELD OFFICE | | | |

CAUTORAN LIFTH OLLICE Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.