

OIL CONS. N.M. DIV-DIST. 2
1301 W. Grand Avenue
Artesia, NM 88210

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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

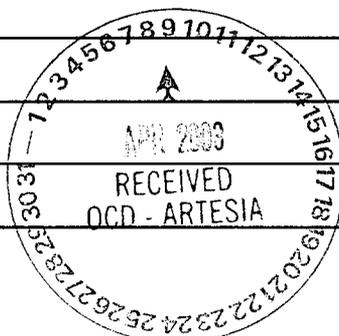
SUBMIT IN TRIPLICATE

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Vintage Drilling LLC

3. Address and Telephone No.
P.O. Box 158, Loco Hills, NM 88255 505-746-1669

4. Location of Well (Footage, Sec., T. R. M. or Survey Description)
**330' FSL 1650' FEL
 S8, T18S, R31E**



5. Lease Designation and Serial No.
LC 070133

6. If Indian, Allottee or Tribe Name

7. If Unit or CA, Agreement Designation
Penasco Shugart Queen Sand Unit

8. Well Name and No.
Penasco Shugart Tr 3 #1

9. API Well No.
30-015-05498

10. Field and Pool, or Exploratory Area
Shugart Queen

11. County or Parish, State
Eddy County, NM

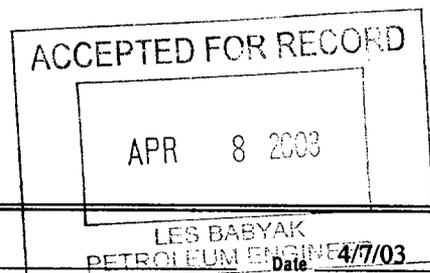
12 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other <u>Conversion to pumping</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 <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form)</small>

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.)*

2/15/03

Set pumping unit on well.
 Run in hole with tubing, rods, pump.
 Put well back on production.
 Initial production 1 BOPD 3BWBD
 Well was put back on production as part of overall plan to change injection pattern of waterflood unit.



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

Signed *Les Babyak* Title **Secretary**

(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
 Conditions of approval, if any:

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 representation & as to any matter within its jurisdiction