



P.O. Box 1277  
Andrews, Texas 79714  
Phone: (432) 524-2371  
Fax: (432) 524-4993

March 13, 2012

Mr. Mike Bratcher  
New Mexico Oil Conservation Division  
District 2  
1301 W. Grand Avenue  
Artesia, New Mexico 88210

**Accepted for record  
NMOCD**

**RE:** Duffield Fed Com 2  
Section 21, 16S, 27E; Eddy Co., NM

Duffield Fed 1  
Section 21, 16S, 27E; Eddy Co., NM

Dear Mr. Bratcher,

Please find enclosed one (1) copy of notice of intent on the above mentioned wells.

Should you have any questions, you may reach the undersigned shown on this letterhead or by cell phone at (432) 770-8342.

Respectfully,

Snow Oil & Gas, Inc.

Joe Lindemood

Enclosure(s)

cc) original mailed to Ms: Jennifer Van Curen, BLM

LOOSELY REPRODUCED FROM ORIGINAL FILED IN THE BLM RECORDS

LOOSELY REPRODUCED

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

## SUNDRY NOTICES AND REPORTS ON WELLS

*Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.*

**SUBMIT IN TRIPLICATE- Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM 76988
2. Name of Operator Snow Oil & Gas Inc		6. If Indian, Allottee or Tribe Name
3a. Address P.O. Box 1277 Andrews, TX 79714	3b. Phone No. (include area code) 432-524-2371	7. If Unit or CA/Agreement, Name and/or No. NMNM 91036
4. Location of Well (Footage, Sec., T, R, M, or Survey Description) 1880' FNL & 2230' FEL Section 21, T16S, R27E		8. Well Name and No. Duffield Fed Com 2
		9. API Well No. 30-015-27746
		10. Field and Pool, or Exploratory Area
		11. County or Parish, State Eddy County, New Mexico

## 12. CHECK APPROPRIATE BOX(ES) 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"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. 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 recompleat 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 recompleat 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.)

Operator will take soil samples for chloride at or below 6" subsurface on or before April 30, 2012. BLM witness shall be present. Upon findings of said test, Snow will analyze best procedure to reclaim and restore pit to original conditions as stipulated in original APD.

Operator will analyze necessary pad reduction requirement as stipulated according to Jim Amos and submit results after soil sample results are determined.

Copy of this sundry is sent to Mike Bratcher of NMOCD.

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Joe Lindemood		Title Agent
Signature <i>Joe Lindemood</i>		Date 3/9/2012

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	Title _____ Office _____	Accepted for record NMOCD
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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.

(Instructions on page 2)