Form 3160-5 (April 2004) 9 2008 OCD-ARTESIA

## UNITED STATES OCD-ARTESIA DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No 1004-0137 Expires March 31, 200
5 Lease Senal No

<b>*</b>	OM B No. 1004-0137 Expires March 31, 2007	
	Lease Senal No	
	J LC028446-A	

SUNDRY	NOTICES AND REF	PORTS ON W	ELLS	LC02	8446-A	
Do not use th	is form for proposals to ell. Use Form 3160-3 (A	odrill or to re	e-enter an	6 If Inde	an, Allottee or Tribe Name	
SUBMIT IN TRI	IPLICATE- Other instr	7 If Unit	7 If Unit or CA/Agreement, Name and/or No			
1 Type of Well Oil Well⊕ □ 【✔	✓ Gas Well 🖂 🔲 Other	8 Well N	8 Well Name and No.			
2 Name of Operator HANSON EN	NERGY		VANDAGRIFF 10  9. API Well No			
3a Address P.O. BOX 1348 ARTESIA, NN	И 88211	3b Phone No (incl 575-746-2262	ude area code)	30-01	5-0131800	
4. Location of Well (Footage, Sec.,				and Pool, or Exploratory Area DAGRIFF KEYES, QN	-	
660 FNL 1540 FEL SEC.8-T	17S-R28E			11 County or Parish, State  EDDY NM		
12. CHECK AI	PPROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTIC	E, REPORT, C	OR OTHER DATA	
TYPE OF SUBMISSION		Т	YPE OF ACTIO	N		_
Notice of Intent	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Reclamat		Water Shut-Off Well Integrity Other	
Subsequent Report  Final Abandonment Notice	Change Plans  Convert to Injection	ete nly Abandon sposal	Ouki	_		
WE REPAIRED FLOW I	LINE AND PLACED THIS W	ELL BACK IN PR	ODUCTION DE	CEMBER 29, 200	JAN 2 5 200  LES BABYAN  PETROLEUM ENG	08
•					PETROLEUM EIVO	andross .
14 Thereby certify that the fore Name (Printed/Typed)  KATHIE HANS	•	Tuto	PRODUCTION	CLEDY		=
Signature Talkie	Harson	> Date		12/31/2007		_
7:4	THIS SPACE FOR	FEDERAL OR	STATE OF	FICE USE		
A			Tetle		Data	==
Approved by Conditions of approval, if any, are certify that the applicant holds legal		Title Office		Date	_	
which would entitle the applicant to Trile 18 U.S.C. Section 1001 and Tril States any false, fictitious or fraudu	le 43 U.S.C. Section 1212, make it.	a crime for any person as to any matter withi	l n knowingly and w n its jurisdiction	allfully to make to	any department or agency of the Unit	ed