

JUL 22 2008

Form 3160-5
(September 2001)

OCD-ARTESIA

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004

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
☐ Oil Well ☐ ☒ Gas Well ☐ Other2. Name of Operator **Corkran Energy, LP**3a. Address
303 Beardsley Lane, C-204 Austin, TX 787463b. Phone No. (include area code)
512-329-6140

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

**1980' FSL & 1980' FEL
Sec. 9, T- 23S, R- 22E**5. Lease Serial No.
NM NM 1133876. If Indian, Allottee or Tribe Name
N/A7. If Unit or CA/Agreement, Name and/or No.
N/A8. Well Name and No.
Frontier 9 Federal Com #19. API Well No.
30-015-3592010. Field and Pool, or Exploratory Area
Huapeche, Morrow11. County or Parish, State
Eddy County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input 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 checked="" type="checkbox"/> Other Strawn Completion
	<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.)

Strawn Completion Cont. :

6-16-08 Tbg. press.- 1450#, csg. press.- 0. Open well up. SWI- tbg. psi 1250#. SDFN, turn well over to well testers.

6-17-08 Install 1/4" gas line from manumatic to stackpack. SDFN

6-18-08 Tbg. press.- 1798#. GIH w/ 1st press. gauge, made a total of 8 tests. SWI SDFN, turn well over to well testers.

6-19-08 SI press. 195-# on 10/64 choke. Purge line & set choke on 10/64, line press. 900#, tbg. press. 900# going down sales line, 1" orifice. Line press. dropped, SDFN, turn well over to well testers.

6-20-08 Well testers on location. SWI

6-21-08 Well testers on location. SDFN

6-23-08 Tbg. press.- 1400#, csg. press.-0. Open up sales line on 12/64 choke. Lay flowline to pit, open well up, flowing gas & a little water. RU swab made 7 runs. SWI SDFN

6-24-08 Tbg. press- 800#, csg. press- 0. Open tbg. up to gas sales line. Stack pack not working right- water going down sales line. SWI

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Angela Lightner angela@rkford.comTitle **Consultant 432-682-0440 office**

Signature

Angela Lightner

Date

06/26/2008**THIS SPACE FOR FEDERAL OR STATE OFFICE USE****ACCEPTED FOR RECORD**

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

Date

Office

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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)

**BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE**

Accepted for record - NMOCD