Form 3160-5 (April 2004)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

	FORM APPRO OM B No. 1004- Expires: March:
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FORM APPROVE			

Expires: March	31. 2007
Lease Serial No	

5.	Lease Serial No.
	NMNM77042

Do not use the abandoned we	is form for proposals t ill. Use Form 3160-3 (a	o drill or to APD) for such	re-enter an proposals.	0	b, II Indian, A	Allouee of 1710e	Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.					7. If Unit or C	CA/Agreement,	Name and/o	r No.
1. Type of Well Oil Well□□ ✓	Gas Well 🗆 🔲 Other			_	8. Well Name	e and No.		
2. Name of Operator Primero Oper	rating, Inc.				Grandvio	ew Fed. #1 No.		
3a Address PO Box 1433, Roswell, NM 882	202-1433	3b. Phone No. (iii 505 622 1001	aclude area code)		30-015-2		tory Area	
4. Location of Well (Footage, Sec., 7		1			10. Field and Pool, or Exploratory Area Sq Lake, Grayburg/SA			
1980' FN&EL, Sec 20, T16S, R	31E	AUG 2.7 2008		1	11. County or	Parish, State		
		OCD-ARTESIA		A	Eddy, NM			
12. CHECK AP	PROPRIATE BOX(ES) TO				PORT, OR	OTHER DAT	Γ A	
TYPE OF SUBMISSION			TYPE OF ACTION	ON				
Notice of Intent ✓ Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construc	Reclam		Resume)	Water Shut- Well Integr		
Final Abandonment Notice	Change Plans Convert to Injection	☑ Plug and Aban ☑ Plug Back		rarily Aban Disposal	don			
determined that the site is ready 8-11-08; Rotary Wireline: 8-12-08; RIH w/ tubing loa 1. 25sx @1675', ti 2. 100 sx @ 750', 3. 10 sx @ 60', th	nal Abandonment Notices shall be for final inspection.) set a CIBP @ 2900' and perford hole with 9# plug mud and his plug was tagged @ 1515' this plug was tagged @ 180' is plug filled the 5 1/2" and 8 d up to BLM standards and a	orated 5 1/2" casin spot balanced plu 5/8" casing to sur	ig @ 750', 454' and igs as follows: face.	d 60'			the operator	has
	ACCEPT	ED FOR RE	COPD	۸۸	CEDT:	בה במר	DEC	ממחי
	1100111	ED I OIL ILE	COLD	AU		ED FOF	MEU	יטולט.
	AUG	G 28 2008			· .	NG 222	200S	
14. I hereby certify that the fore Name (Printed/Typed) Phelps White	going is true and correct Guye, NMOCD-D	Deputy Field I istrict II AR	nspector TESIA le President		ALL DE MA	SM	2	CNT
Signature	The second secon	Da	te 8/1	3/05	. /	SBAD FIELD	OFFICE	
THIS SPACE FOR FEDERAL OR STATE OFFICE USE								
A			Tin			4	<u></u>	
Approved by Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to	or equitable title to those rights i		Office		Da	ite		
Title 18 U.S.C. Section 1001 and Title States any false, fictitious or fraudule	43 U.S.C. Section 1212, make it a ent statements or representations	crime for any pers as to anymatter wit	on knowingly and v	willfully to	make to any	department or a	gency of the	United