

RECEIVED**OCD-ARTESIA**Form 3160-5
(February 2005)

JUN 15 2010

UNITED STATES

DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

NMOCD ARTESIA

FORM 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.**5. Lease Serial No.
NMNM71796

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

7. If Unit of CA/Agreement, Name and/or No.

North Square Lake Unit NM101360X

8. Well Name and No.
North Square Lake Unit 839. API Well No.
30-015-0491510. Field and Pool or Exploratory Area
Square Lake GB SA11. Country or Parish, State
Eddy NM

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

CBS Operating Corp

3a. Address P O Box 2236

Midland TX 79702

3b. Phone No. (include area code)

432/685-0878

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

550' FSL & 550' FEL UL P Sec.29 T16S R31E

12. CHECK THE 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 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 checked="" 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Convert well to WIW as per approved NMOCD Order PMX-224.

MI & RU pulling unit. TOH with existing tubulars.

RIH with bit and scraper and tag total depth and TOH.

Pick up IPC tubing and injection packer. RIH and set 50' above top perforation.

Run MIT, if holds, unseat packer. Circulate hole with packer fluid and Notify NMOCD to run new MIT.

If MIT fails, locate cause and repair. Run new MIT and commence injection.

Rejected.
Submit plans to P&A by July 12, 2010

CRW 6/11/10

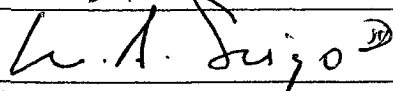
14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

M. A. Sirgo, III

Title Engineer

Signature



Date May 18, 2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

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)