

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia FORM APPROVED  
Bureau 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 type="checkbox"/> Gas Well <input checked="" type="checkbox"/> INJECTION		5. Lease Serial No. NMNM 08277
2. Name of Operator Agua Sucia LLC		6. If Indian, Allottee or Tribe Name
3a. Address 14605 South Memorial Drive, Bixby OK 74008	3b. Phone No. (include area code) 918-366-7959	7. If Unit or CA, Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1650' FSL & 2185' FWL Sec. 33, T20S, R28E		8. Well Name and No. Saladar Unit #6
		9. API Well No. 30-015-02448
		10. Field and Pool, or Exploratory Area SALADAR; YATES
		11. County or Parish, State Eddy, NM

**12. CHECK APPROPRIATE BOX(s) 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 MIT TEST
	<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 recomplete 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 recompletion 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.)

Agua Sucia LLC respectfully submits the attached chart on the referenced well. MIT Test was performed on October 7, 2010.  
Starting pressure was 540 psi and ending pressure was 530 psi and held for 30 minutes. Test was witness by Paul Swartz, BLM.

Accepted for record  
NMOCD LF  
2/16/11

RECEIVED  
FEB 15 2011  
NMOCD ARTESIA

ACCEPTED FOR RECORD

FEB 9 2011  
/s/ JD Whitlock Jr

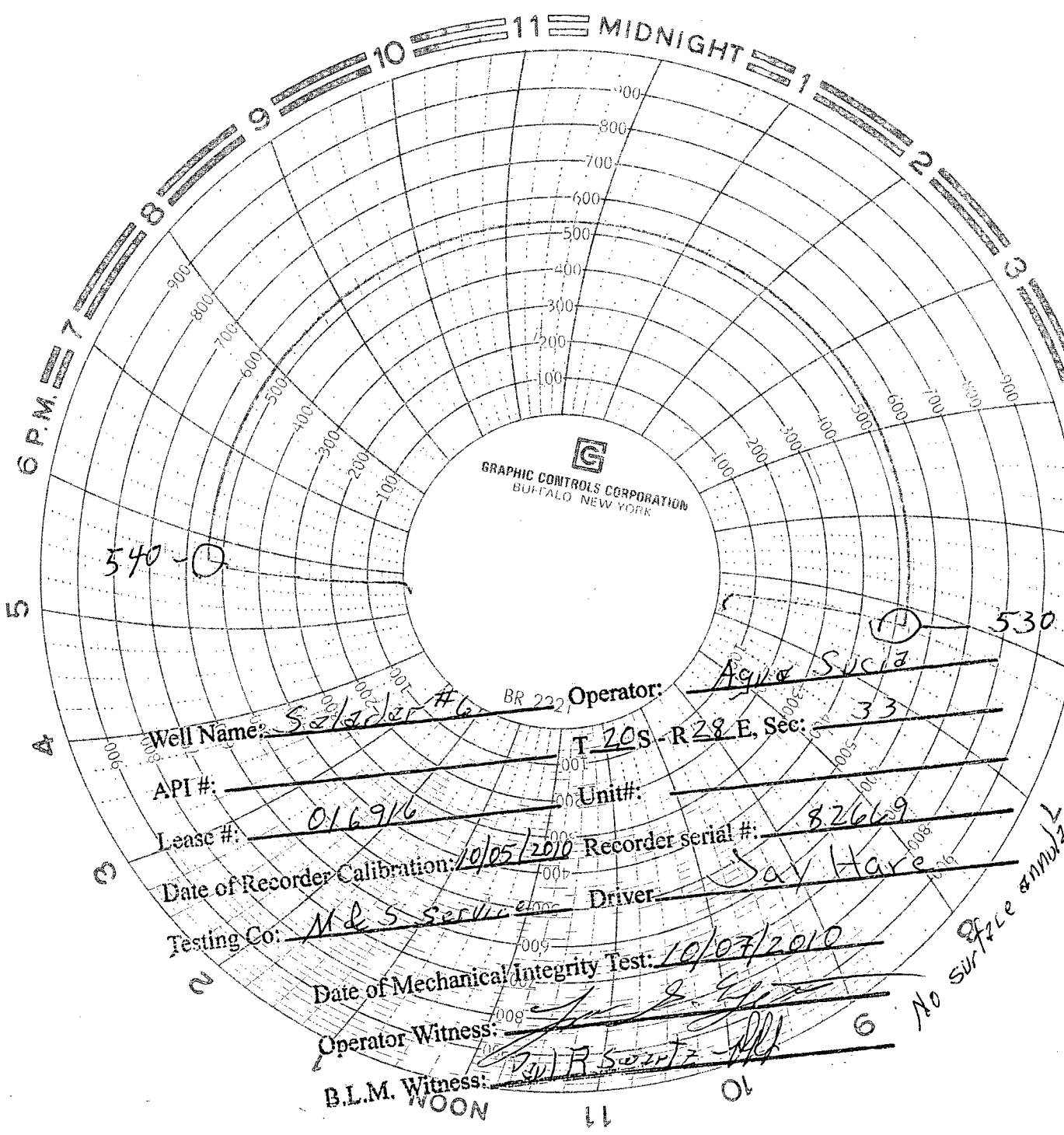
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Debbie McKelvey	Title Agent
Signature <i>Debbie McKelvey</i>	Date 10/12/10

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE

**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 and false, Fictitious or fraudulent statements or representations as to any matter within its jurisdiction



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

540

530

Well Name: S-21221-#6 BR 222 Operator: Aggie Suda  
API #: \_\_\_\_\_ T-20S-R28 E, Sec: 33  
Lease #: 016916 Unit #: \_\_\_\_\_  
Date of Recorder Calibration: 10/05/2010 Recorder serial #: 82669  
Testing Co: M & S Service Driver: Jay Hare  
Date of Mechanical Integrity Test: 10/07/2010  
Operator Witness: [Signature]  
B.L.M. Witness: [Signature]

No surface annular