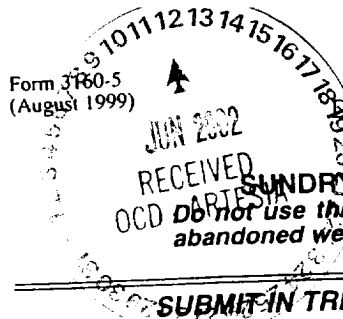


UNITED STATES

DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

CLSF

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-drill an
abandoned well. Use Form 3160-3 (APD) for such proposals.

Oil Cons

N.M. DIV-1

1301 W. Grant

Artesia, NM 88211

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

PREMIER OIL & GAS, INC.

3a. Address

PO BOX 1246, ARTESIA, NM 88211-1246

3b. Phone No. (include area code)

(505) 748-2093

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

330 FSL 400 FWL, SEC. 15-T17S-R30E, UNIT M

5. Lease Serial No.

NM-0384575

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

DALE H. PARKE "B" TR B #10

9. API Well No.

30-015-31200

10. Field and Pool, or Exploratory Area

LOCO HILLS PADDOCK

11. County or Parish, State

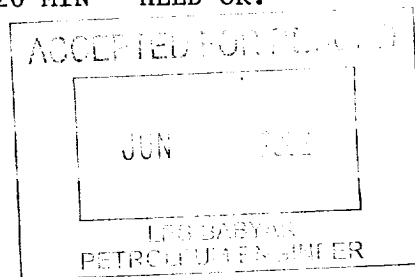
EDDY CO., NM

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 <u>SPUD, CMT CSG</u>
	<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.)

SPUD WELL @ 2:00 PM ON 6/3/02, DRLD 17 1/2" HOLE TO 420', RAN 9 JTS (401.90')
13 3/8" 48# H40 CSG TO 418', CMTD W/ 400 SX P+, PLUG DOWN @ 6:30 AM ON 6/4/02,
CIRC 125 SX TO PIT. WOC 18 HRS, TESTED CSG TO 600# FOR 20 MIN - HELD OK.

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

DIANA J. CANNON

Title AGENT

Signature

Date JUNE 5, 2002

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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

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.

RECEIVED

2002 JUN -6 AM 8:43

SUPREMACY HAND WGMT
HOSPITAL OFFICE