Form 3160-5 (November 1994)

NITED STATES DEPARTMENT OF THE INTERIOR RUREAU OF LAND MANAGEMENT

| | FORM APPROVED |
|------------------|--------------------------------------|
| √.M. On Cons. | Division Budget Bureau No. 1004-0135 |
| 11 S. 1st Street | 5. Lease Serial No. |

| HORIZONTAL WELL 8. Well Name and No. EL PASO "23" 2 FEDERAL 9. API Well No. 3b. Phone No. (include area code) P. O. BOX 51810, MIDLAND, TEXAS 79710-1810 915-688-6906 8. Well Name and No. EL PASO "23" 2 FEDERAL 9. API Well No. 30-015-29307 10. Field and Pool, or Exploratory Area | SUNDRY NOTICES | AND REPORTS ON W | Altesia, i | Street M 8821 | 6. If Indian, Al | No. |
|--|--|--|--|---------------------------|------------------|---|
| SUBMIT IN THIPLICATE - Other instructions on reverse side | | | | | | |
| MORIZONTAL WELL St. New York No. 1 No. | SUBMIT IN TRIPLICATE - Other instructions on reverse side | | | | | A/Agreement, Name and or No |
| EDERAL BURLINGTON RESOURCES OIL & GAS COMPANY 12. Address 13. Phone No. (include area code) 13. Phone No. (include area code) 14. Address 15. Country of Will Floringe, Sec. 7. A. M., or Survey Description) 15. Location of Will Floringe, Sec. 7. A. M., or Survey Description) 16. Location of Will Floringe, Sec. 7. A. M., or Survey Description) 17. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE. REPORT. OR OTHER DATA 18. TYPE OF SUBMISSION 19. Type Of ACTION 19. Subsequent Report 19. Describe Proposed or Committee Operation (Clearly) late all persions details, including estimated carring date of any syropad work and performance of the control of the | I Type of Well Oil X Gas Well Other HORIZONTAL WELL | | | | | and No. 2 |
| Addition Discount of Well Products Sec. 2.4. M. o. Survey Descriptions | 2 Name of Operator | AANV | | | | |
| P. O. 80X 51810, MIDLAND, TEXAS 79710-1810 915-688-6906 10 Field and Pool, or Exporative Arcs ACCORDING TO Wall Production of Wall Production (Start/Resound) 12 CHECK APPROPRIATE BOXIES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 12 CHECK APPROPRIATE BOXIES) TO INDICATE NATURE OF NOTICE REPORT, OR OTHER DATA TYPE OF SUBMISSION 14 Acadaza 15 Despired in Production (Start/Resound) 15 Waler Shut-Off 16 Despired in Production (Start/Resound) 16 Subreguent Report 17 Cessing Repair 18 Cessing Repair 19 Usg and Abandoon 18 Recomplete 19 Walter Shut-Off 10 Walter Shut-Off 11 Counts of Profession (Start/Resound) 12 Walter Shut-Off 12 Walter Shut-Off 13 Walter Shut-Off 14 Walter Shut-Off 15 Walter Shut-Off 16 Walter Shut-Off 17 Walter Shut-Off 18 Walter Shut-Off 18 Walter Shut-Off 19 Walter Shut-Off 19 Walter Shut-Off 19 Walter Shut-Off 19 Walter Shut-Off 10 Walter Shut-Off 10 Walter Shut-Off 10 Walter Shut-Off 11 Counts of Profession (Start/Resound) 12 Walter Shut-Off 11 Counts of Profession (Start/Resound) 12 Walter Shut-Off 19 Walter Shut-Off 19 Walter Shut-Off 10 Walter Shut-Off 10 Walter Shut-Off 10 Walter Shut-Off 10 Walter Shut-Off 11 Walter Shut-Off 11 Walter Shut-Off 12 Walter Shut-Off 12 Walter Shut-Off 13 Walter Shut-Off 14 Walter Shut-Off 1 | | | | | | |
| BOSS DRAW WOLFCAMP (GAS) B, 1120' FNL & 2630' FEL 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Acidize Despen Production (Start/Resource) Water Shut-Off Alter Cating Fracture Treat Reclamation Wall Integrity Water Shut-Off Change Plant New Construction Recomplete X Other _CHANGE | Ja. Nation | | | | | |
| TYPE OF SUBMISSION Notice of Intent | 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) B, 1120' FNL & 2630' FEL | | | | | Parish, State |
| Notice of Intent Acidize | 12. CHECK APPROPRI | ATE BOX(ES) TO INDICAT | TE NATURE OF NOTICE | E, REPORT | , OR OTHER DA | TA |
| Alter Casing Repair | TYPE OF SUBMISSION | | TYPE O | F ACTION | | |
| Casing Repart Note Construction Recompleted Tube Plug and Abandon Temporarity Abandon LEASE NUMBER | | | | | · | |
| 3. Describe Proposed or Coowninglisted Operation (clearly sate all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to despen directionality or recomplete horizontality, 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 BLMFIAR. 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 3104-4 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 operation best determined that the final site is ready for final inspection.) THE LEASE NUMBER (NM 15311) USED WITH THE NEW WELL COMPLETION PACKAGE WAS FOR THE SURFACE LOCATION. ACCORDING TO OUR LANDMAN, WE NEED TO USE THE LEASE NUMBER FOR THE BOTTOM HOLE LOCATION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. ACCEPTED FOR BECOGGAING THE BOTTOM HOLE LOCATION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. Tride REGULATORY REPRESENTATIVE Date 7-28-97 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Tride Date | X Subsequent Report | Casing Repair | New Construction | Recomple | te | X Other <u>CHANGE</u> |
| 3. Describe Proposed or Commispleted Operation (clearly state all pertinent details, including entimated marting date of any proposed work and approximate duration thereof. If the proposed is to despin directionality or recomplete horizontality, give substraface locations and measured and true vertical depths of all pertinent markers and zones following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval. a Form 31:60-4 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 31:60-4 shall be filed only after all requirements, including reclamation, have been completed, and the operation determined that the final site is ready for final inspection.) THE LEASE NUMBER (NM 15311) USED WITH THE NEW WELL COMPLETION PACKAGE WAS FOR THE SURFACE LOCATION. ACCORDING TO QUE LANDMAN, WE NEED TO USE THE LEASE NUMBER FOR THE BOTTOM HOLE LOCATION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. ACCEPTED FOR RECOGNITION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. Title REGULATORY REPRESENTATIVE Date 7-28-97 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Title Date Order of approved. If any, are statched. Approval of this notice does not warrant or office. | Final Abandonment Notice | Change Plans | Plug and Abandon | Temporar | ily Abandon | LEASE NUMBER |
| If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and metasted and the vehicul depth with the work with the work with the work with the performed or provide the Bond No. on file with BLM/FMI. Required subsequent proper shall be filed within 19 deep following completion of the involved operations. If the operation results in a mustiple completion or recompletion in the same way of the field once testing has been completed. Final Abandomient Notices shall be filed only after all requirements, including reclamation. have been completed, and the operator has determined that the final site is ready for final inspection.) THE LEASE NUMBER (NM 15311) USED WITH THE NEW WELL COMPLETION PACKAGE WAS FOR THE SURFACE LOCATION. ACCORDING TO OUR LANDMAN, ME NEED TO USE THE LEASE NUMBER FOR THE BOTTOM HOLE LOCATION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. ACCEPTED FOR REGICAL (ORIGINAL SECTION OF THE BOTTOM HOLE LOCATION (NM 16343). THIS WELL HAS A COMMUNITIZATION AGREEMENT. Title REGULATORY REPRESENTATIVE Date 7-28-97 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Title Approved by Title Date Office | _ | Convert to Injection | Plug Back | Water Dis | sposal | |
| 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Page 7-28-97 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 | Attach the Bond under which the work will be per following completion of the involved operations. If testing has been completed. Final Abandonment N determined that the final site is ready for final inspection. THE LEASE NUMBER (NM 15311) USED ACCORDING TO OUR LANDMAN, WE NEED | rformed or provide the Bond N the operation results in a multi outces shall be filed only after n.) WITH THE NEW WELL CO TO USE THE LEASE N | o. on the with BLM/BIA. iple completion or recomple all requirements, includin OMPLETION PACKAGE UMBER FOR THE BOT ACCEP | WAS FOR TOM HOLE | RECORD | m 3160-4 shall be filed once pleted, and the operator has CE LOCATION. (NM 16343). THIS |
| Name (Printed Typed) Page 7-28-97 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Title 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 | | | | BLM | | |
| 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 | | original is the time to the ti | | | | |
| 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 | | | <u> </u> | | | |
| 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 | TUI | S SPACE FOR FEDERA | | E USE | | |
| 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 | | O STACE FOR EDERA | | | D | ate |
| | Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to | o those rights in the subject le | or Office | | | |

Title 18 U.S.C. Section 1001, makes 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.