

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**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.**

FORM APPROVED  
OMB NO. 1004-0135

Expires: November 30, 2000

5. Lease Serial No.  
NMNM-03380

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
(Multiple--See Attached)

9. API Well No.  
(Multiple--See Attached)

10. Field and Pool, or Exploratory Area  
BLANCO MESAVERDE

11. County or Parish, and State  
SAN JUAN NM

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well ☐ Oil Well ☒ Gas Well Other

2. Name of Operator  
CROSS TIMBERS OPERATING CO.

3a. Address 2700 FARMINGTON AVE., BLDG K, SUITE 1  
FARMINGTON, NM 87401

3b. Phone No.(include area code)  
505.324.1090 Ext 4023

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

(Multiple--See Attached)

30-045-06347

**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"/> SURCOM
	<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.)

CROSS TIMBERS OPERATING COMPANY HAS COMPLETED SURFACE COMMINGLING OF THE FLORANCE D LS #1 AND FLORANCE D LS #14  
APPROVED DHC ORDER 1458. SUBMITTING ENGINEER: DARRIN STEEDSUBMITTAL DATE: 3/12/01

PC 1025



Electronic Submission #2906 verified by the BLM Well Information System for CROSS TIMBERS OPERATING CO. Sent to the Farmington Field Office  
Committed to AFMSS for processing by Maurice Johnson on 03/14/2001

Name (Printed/Typed) DARRIN STEED

Title ENGINEER

Signature

Date 03/12/2001

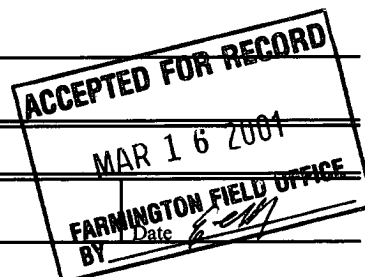
**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

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 which would entitle the applicant to conduct operations thereon.

Office



WELL/FAC #	WELL/FAC NAME	API NUMBER	LOCATION
1	FLORANCE D LS	3004506342	990FEL 1650FSL NESE 21 27N 08W
14	FLORANCE D LS	3004506347	1750FWL 1750FSL NESW 21 27N 08W