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Form 3160-5 DEC 2 3 2(10)8 UNITED STATES (September 2001) DEPARTMENT OF THE INTERIOR HOBBSOC DUREAU 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. SUBMIT IN TRIPLICATE- Other instructions on reverse side.			FORM APPROVED OM B No 1004-0135 Expires: January 31, 2004 5. Lease Serial No. NM 12412 6. If Indian, Allottee or Tribe Name N/A
			7. If Unit or CA/Agreement, Name and/or No.
1. Type of Well ☐ ☐ Gas Well ☐ ☐ Other			N/A 8. Well Name and No. Southeast Lusk 27 #1
2. Name of Operator Edge Petroleum Operating Company, Inc.			9. API Well No.
3a Address 3b. Phone No. (include area code) 1301 Travis, Suite 2000 Houston, TX 44002 713-335-9808		30-025-38678 10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Lusk, Bone Springs, South
487' FSL & 1980' FWL Sec/ 27, T- 19S, R- 32E			11. County or Parish, State Lea Co. NM
12. CHECK APPROPRIATE BOX	(ES) TO INDICATE N.	ATURE OF NOTICE, R	EPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION		
Notice of Intent Subsequent Report Final Abandonment Notice Casing Repair Change Plans Convert to Inject If the proposal is to deepen directionally or recomplete Attach the Bond under which the work will be perform following completion of the involved operations. If the testing has been completed. Final Abandonment Notice determined that the site is ready for final inspection.) Completion 12-8-08 to 12-11-08 Well testing.	Plug and Abarction Plug Back the all pertinent details, includit horizontally, give subsurface led or provide the Bond No. or operation results in a multiple es shall be filed only after all results.	ction Recomplete ndon Temporarily Al Water Disposal ing estimated starting date of a locations and measured and tru in file with BLM/BIA. Requir e completion or recompletion requirements, including reclar	Well Integrity Other Completion oandon ony proposed work and approximate duration thereof. The vertical depths of all pertinent markers and zones, are desubsequent reports shall be filed within 30 days of a new interval, a Form 3160-4 shall be filed once nation, have been completed, and the operator has
12-8-08 to 12-11-08 Well testing. 12-12-08 to 12-14-08 Well SI. DEC 2 3 2006 HOBBSOCD			ACCEPTED FOR RECORI
		DEC 2 1 2008 BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	
14. Thereby certify that the foregoing is true and corre Name (Printed/Typed)	ect		
Angela Lightner angela@rkford.com Title Consultant 432-682-0440 office			0440 office
Signature angela highliner		Date 12/15/2008	
THIS SPACE	FOR FEDERAL O	R STATE OFFICE	USE
Approved by Conditions of approval, if any, are attached. Approval of the certify that the applicant holds legal or equitable title to those which would entitle the applicant to conduct operations there.	se rights in the subject lease reon.	Office	Date
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, States any false, fictitious or fraudulent statements or repres	make it a crime for any persentations as to any matter wit	son knowingly and willfully t hin its jurisdiction.	o make to any department or agency of the United