Form 3 i 60-5 (September 2001)

Oil Cons. UNITED STATES N.M. DIV-Dist. 2 FORM OMB N DEPARTMENT OF THE INTERIOR301 W. Grand Avenue Expires: If BUREAU OF LAND MANAGEMENT Artesia, NM 88210 SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED OMB No. 1004-0135 Expires: January 31, 2004

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.						NM24160		
						6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on reverse side 1. Type of Well RECEIVED						7. If Unit or CA/Agreement, Name and/or No.		
☐ Oil Well ☐ Gas Well ☐ Other				, LECEIVED		8. Well Name	and No	
2. Name of Operator			APR 2 6 2004			OSAGE FEDERAL #7		
ST MARY LAND & EXPLORATION				OCD ARTESIA				
3a. Address		3b.	Phone No. (inclu			30-015-26051		
PO BOX 7168 BILLINGS, MT 59103			(406) 245-6248			10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)						PARKWAY YATES		
UL: K 1980' FSL & 2080' FWL SEC. 35 - T19S - R29E					11. County or Parish, State EDDY, NM			
12. CHECK API	PROPRIATE BOX(ES) TO	IND	ICATE NATI	URE O	F NOTICE, RE		THER DATA	
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, RI TYPE OF SUBMISSION TYPE OF ACTION						TOKI, OK O	THER DATE	
I THE OF SUBMISSION	YPE OF SUBMISSION TYPE OF ACTION							
	Acidize [Deepen		Production (Start/I	Resume)	Water Shut-Off	
Notice of Intent	Alter Casing	☐ F	Fracture Treat		Reclamation	\Box	Well Integrity	
Subsequent Report	Casing Repair] 1	New Construction		Recomplete		Other	
	Change Plans	☐ P	Plug and Abandon		Temporarily Abar	ndon		
Final Abandonment Notice	Convert to Injection	_ P	Plug Back		Water Disposal			
The Osage Federal #7 has been T We wish to extend the TA status We propose to continue testing th Recently an offset operator has be what they are doing and determin	of the well. Attached is the chare mechanical integrity every of the making some successful Ya	rt for ther y	the successful lear.	MIT permedical permedi	formed on 2/11/0 rectly to the south	4. It previously n of St. Mary's i	passed an MIT on 12/18/01. eases. We need to evaluate NTH PERIOD	
14. I hereby certify that the foregoin	g is true and correct		1				- Masocia	
Name (Printed Typed) HERB THACKERAY			Title	Title OPERATIONS ENGINEER				
· · · · · ·				OI ERATIONS ENGINEER				
Signature Stewarth	Thacknay	ार <i>्डिश</i>		/27/04				
	THIS SPACE FO	JR F	EDERAL OR	STATE	OFFICE USE			
Approved by (Signature)	/s/ Joe G. Lara			Name (Printed Typed) /s/ Joe G. Lara Title Pet Engr				
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to determine the appl	attached. Approval of this notice at or equitable title to those rights conduct operations thereon.	does in th	iot waitant of t	Office CA	RLSBAD F	FIELD OF	FICE 4/23/04	

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.

