

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO 1004-0137  
Expires July 31, 2010

OCD-ARTESIA Lease Serial No

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.**

LC036194

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

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

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

JAN 07 2009

OCD-ARTESIA

2. Name of Operator

Stephens & Johnson Operating Co.

8. Well Name and No

Welch Federal

#1

3a. Address

P.O. Box 2249, Wichita Falls, TX 76307-2249

3b. Phone No (include area code)

(940) 716-5376

9. API Well No

30-015-02284

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

330' FNL & 2310' FWL

Sec. 22, T19S, R28E

Unit C

10. Field and Pool, or Exploratory Area

E Millman 7R 46555

11. County or Parish, State

Eddy

NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off                    |
| <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity                    |
| <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other <u>Change of</u> |
| <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <u>Operator eff</u>  |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            | <u>11-1-08</u>   |

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 recomplete 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 recompletion 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 final site is ready for final inspection.)

This is notification of a Change of Operator effective 11-1-08.

Bond Coverage: BLM Bond File No.: NMB000398, Surety Bond #B002733

Previous Operator: Ameristate Exploration, LLC  
401 Congress Ave., Ste. 2900  
Austin, Tx 78701

ACCEPTED FOR RECORD

NO C-145

JAN 7 2009

Gerry Guye, Deputy Field Inspector  
NMOCD-District II ARTESIA

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

Devire D Crabb

Title Production Analyst

Signature

Date 11-7-08

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

