

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

MAR 03 2009

FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

## 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.**1. Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator **OGX Resources, LLC**3a. Address  
**POB 2064 Midland, TX 79702**3b. Phone No. (include area code)  
**432-685-1287**4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**770'FNL & 730 FWL Sec. 35, T- 22S, R- 31E**5. Lease Serial No.  
**NM 101601**6. If Indian, Allottee or Tribe Name  
**N/A**7. If Unit or CA/Agreement, Name and/or No.  
**N/A**8. Well Name and No.  
**Tankless 35 Federal #1**9. API Well No.  
**30-015-36784**10. Field and Pool, or Exploratory Area  
**Livingston Ridge - Bone Spring**11. County or Parish, State  
**Eddy Co. NM**

## 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"/> Other <b>Set prod. casing and cement</b>
	<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 recomplate 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 site is ready for final inspection.)

**Production Casing Set & Cement****2-18-09 Ran 5 1/5" 17# N-80 BTC, LTC & CR13 FOX casing as follows:**

Float shoe, 1 jt 5 1/2" 17# N-80 BTC, float collar, 1 jt 5 1/2" N-80 BTC x CR13 FOX, 145 jts 5 1/2 17# CR13 FOX, 1 jt 5 1/2" N-80 FOX x LTC, 1 jt 5 1/2" N-80 LTC, 1 jt 5 1/2" N-80 LTC x CR13 FOX, 25 jts 5 1/2" 17# CR13 FOX, 1 jt 5 1/2" 17# N-80 CR13 FOX x LTC, 135 jts 5 1/2" 17# N-80 LTC. Casing set @ 11,625'. DV tool set @ 5964'. Cement stage 1 lead: 341 sxs 50/50 POZ "C" + 1% D044 + 10% D020 + 0.6% D112 + 5 lb/sk D042 + 0.25 lb/sk D029 + 40 lb/sk D132, wt.- 11.8, yield- 2.38. Stage 1 tail: 845 sxs "PVL" + 2% D174 + 0.3% D167 + 0.1% D065 + 0.2% D046 + 0.4% D800, wt.- 13, yield- 1.42. Dropped DV bomb & circ. Circ. 125 sxs cmt. to surface. Stage 2 lead: 673 sxs 50/50 POZ "C" + 1% D044 + 10% D020 + 0.6% D112 + 5 lb/sk D042 + 0.25 lb/sk D029 + 40 lb/sk D132, wt.- 11.8, yield- 2.38. Stage 2 tail: 200 sxs "C" + 0.4% D013, wt.- 14.8, yield- 1.33. Cement did not circ.

**2-19-06 ND BOP, cut off casing. NU tbg. head & test to 5000 psi. Rig released @ 2:00pm.**  
A cement bond log will be ran to verify cement tops.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)**Angela Lightner angela@rkford.com**Title **Consultant 432-682-0440-office**

Signature

*Angela Lightner*

Date

**02/20/2009****ACCEPTED FOR RECORD****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 which would entitle the applicant to conduct operations thereon.

Title

Date

**FEB 28 2009**

Office

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.

(Instructions on page 2)

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE