Form 3160-5

## **UNITED STATES**

OCD-ARTESIA|

FORM APPROVED

Approved By	/S/ JOE	G. LARA	Titl	Valoria .			DAN 0 8 200	
		THIS SPACE FO				SE		
Signature	(Electronic St	abmission)	Date	11/11/200	3			
Name (Printed/T)	ped) BEVERLY	HATFIELD	Title	AUTHOR	IZED SIGI	NATURE		
14. I hereby certify	that the foregoing is t	Electronic Submission #	IERGY COMPANY,	sent to the Ca	arisbad	-		
·	·							
* Sukj	est to	perfarming	an M	T W	lin .	30 days		
AN MIT WAS	WITNESSED BY	BLM ON 1-24-98.						
POTENTIAL.	MERIT REQUES	EVALUATE & DEVELO ST THAT IN LIEU OF PL ORE AS A SEVEN RIVE	UGGING THIS W	ELLBORE TH	IAT IT RE	MAIN T&A PRIOR T	OITATION O	
If the proposal is Attach the Bond following comple testing has been of	to deepen directional under which the work tion of the involved of	ation (clearly state all pertiner by or recomplete horizontally, will be performed or provide operations. If the operation re- undonment Notices shall be file al inspection.)	give subsurface locati the Bond No. on file v sults in a multiple com	ons and measured with BLM/BIA. I coletion or recomme	d and true ve Required sub pletion in a r	ertical depths of all pertine osequent reports shall be f new interval, a Form 3160	nt markers and zones. iled within 30 days -4 shall be filed once	
		☐ Convert to Injection	☐ Plug Bac	: 	□ Water I	Disposal		
☐ Final Abandonment Notice		☐ Casing Repair ☐ Change Plans	☐ New Con☐ Plug and		□ Recomp Recomport	olete arily Abandon	☐ Other	
☐ Subsequent 1		☐ Alter Casing	Fracture		☐ Reclamation		☐ Well Integrity	
Notice of Int	ent	☐ Acidize	☐ Deepen		☐ Product	ion (Start/Resume)	☐ Water Shut-Off	
TYPE OF SU	TYPE OF SUBMISSION TYPE OF ACTION							
12.	CHECK APPR	OPRIATE BOX(ES) TO	INDICATE NA	TURE OF NO	TICE, RI	EPORT, OR OTHER	DATA	
Sec 20 T17S	R31E SENE 2310	OCD-ARTESIA			EDDY COUNTY, NM			
	(Footage, Sec., T.,				11. County or Parish, and State			
3a. Address 13727 NOEL DALLAS, TX	RD., STE 500	3b. Phone No. (include area code) Ph: 972.628.1630 ELECTIVED Fx: 972.960.1252			10. Field and Pool, or Exploratory GRAYBURG			
2. Name of Operator Contact: MERIT ENERGY COMPANY Contact: BEVERL'S E-Mail: bev				ELD eld@meritenerg	gy.com	9. API Well No. 30-015-05306-00	)-S1	
1. Type of Well ☐ Gas Well ☐ Other						8. Well Name and No. TURNER B 34		
SUBMIT IN TRIPLICATE - Other instructions on reverse side.						7. If Unit or CA/Agreement, Name and/or No.		
	Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
		REAU OF LAND MANA IOTICES AND REPO		<b>;</b>	·	5. Lease Serial No. NMLC029395B	0, 200	
(August 1999)		DEPARTMENT OF THE INTERIOR				OMB NO. 1004-0135 Expires: November 30, 2000		

CARLSBAD FIELD OFFICE 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.