

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

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  
St. Mary Land & Exploration Co.3a. Address 3b. Phone No. (include area code)  
3300 N. A Street, Bldg. 7, Ste. 200 Midland, TX 79701 (832) 688-17894. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec. 35 - T-19S-R29E  
2635 FSL & 2640 FEL5. Lease Serial No.  
NM24160

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement Name and/or No.  
NM88491X

8. Well Name and No.

Parkway Delaware Unit #506

9. API Well No.

30-015-27464

10. Field and Pool, or Exploratory Area  
Parkway Delaware11. County or Parish, State  
Eddy Co.  
New Mexico

## 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 checked="" 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 type="checkbox"/> Other
	<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 recompleat 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 recompleat 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.)

PDU #506 was pressured tested on 5/19/2010.

Successfully tested to 560 PSI held for 30 min.

Chart attached.

Accepted for record  
NMOC DLF  
7/28/1014. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Donna Huddleston

Title Production Tech

Signature

Date 06/24/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

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

Office

Date

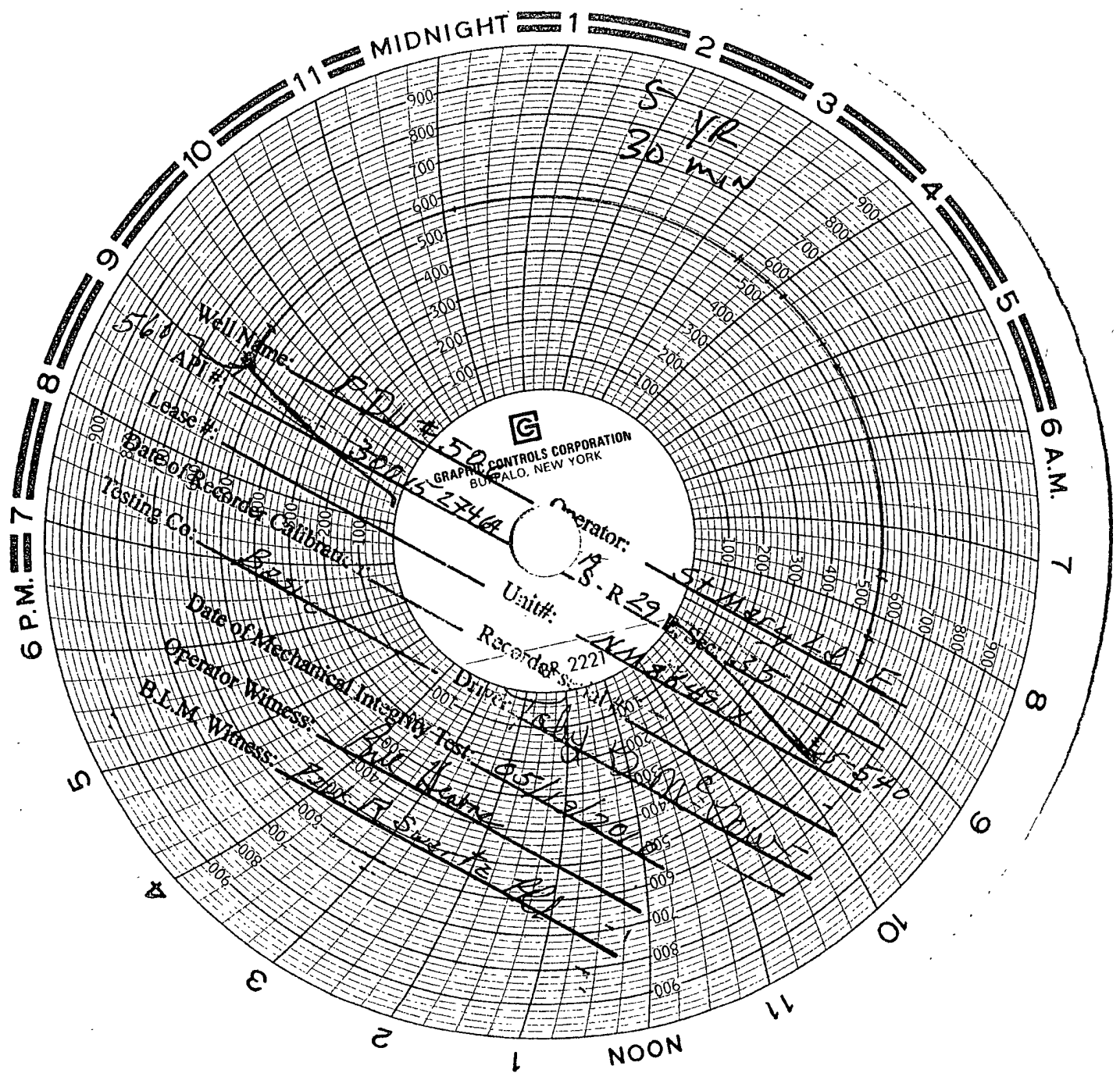
JUL 15 2010

Is/ Chris Walls

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.

BLM/BIA  
CARLSBAD FIELD OFFICE

(Instructions on page 2)



GRAPHIC CONTROLS CORPORATION  
BUFFALO, NEW YORK

Well Name: 560  
API #: 327  
Lease #: 327  
Date of Recorder Calibration: 3/2/80  
Testing Co.: BEL

Operator: S. R. 22  
Unit #: 574

Date of Mechanical Integrity Test: 05/19/80  
Operator Witness: Full Name  
B.L.M. Witness: Full Name

Recorder S. 2221

Driver: Full Name  
Test: Full Name