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Form 3160-5
November 1983)
(Formerly 9-331)

UN[ITE]D STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPL[ICATE]* (Other instructions on reverse side)

Budget Bureau No. 1004-0135
Expires August 31, 1985

5. LEASE DESIGNATION AND SERIAL NO.
NM-16099

6. IF INDIAN, ALLOTTEE OR TRIBE NAME

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir. Use "APPLICATION FOR PERMIT—" for such proposals.)

7. UNIT AGREEMENT NAME
API # 30-005-60411

1. OIL WELL [ ] GAS WELL [XX] OTHER

8. FARM OR LEASE NAME
FEDERAL "14"

2. NAME OF OPERATOR
HERMAN V. WALLIS

9. WELL NO.
1

3. ADDRESS OF OPERATOR
Post Office Box 291858, Kerrville, Texas 78029-1858

10. FIELD AND POOL, OR WILDCAT
Sams Ranch Grayberg

4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.)
At surface
1980' FSL & 1980' FWL (NESW)

RECEIVED OCD - ARTESIA

11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA
Sec 14, T14S, R28E

14. PERMIT NO.

15. ELEVATIONS (Show whether DF, RT, GR, etc.)
3600.3' GR

12. COUNTY OR PARISH: Chaves
13. STATE: New Mexico

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:

TEST WATER SHUT-OFF	[ ]	PULL OR ALTER CASING	[ ]
FRACTURE TREAT	[ ]	MULTIPLE COMPLETE	[ ]
SHOOT OR ACIDIZE	[ ]	ABANDON*	[ ]
REPAIR WELL	[ ]	CHANGE PLANS	[XX]
(Other)			

SUBSEQUENT REPORT OF:

WATER SHUT-OFF	[ ]	REPAIRING WELL	[ ]
FRACTURE TREATMENT	[ ]	ALTERING CASING	[ ]
SHOOTING OR ACIDIZING	[ ]	ABANDONMENT*	[ ]
(Other)			

(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

Well produces dry natural gas from shallow Grayburg Formation, completed above the San Andres Formation. Well repair was attempted approximately 09-15-98 by routine maintenance. Conditions were found that require major equipment and expenses to repair. Present Natural Gas Prices, Tax Burdens and costs of operation has been considered in connection to repairing this well. costs of repair operations will put this Operator in Economic Stress. Request 90-day extension to your letter instructing me to plug this well. Further request that any subsidy in any form be granted this small Operator.

Request denied, Lease NM 16099 will be terminated effective Oct 16, 2001, Please submit plugging program with this office within 30-days.
ARL

18. I hereby certify that the foregoing is true and correct

SIGNED Herman V. Wallis TITLE OPERATOR DATE 121001

(This space for Federal or State office use)

TITLE DATE

Accepted for record
JAN 23 2002
only

*See Instructions on Reverse Side