M.M. Of Cors. D. Moss

c15 F

Form 3160-5 (June 1990)

ATTESIA, INCOMENIASIO UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993

New Name and No.	BUREAU OI	F LAND MANAGEMENT	5. Lease Designation and Serial No.
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. SUBMIT IN TRIPLICATE			LC 058594 A
SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE 1 Unit or CA. Agreement Designation SUBMIT IN TRIPLICATE SUBMIT SUBMI			6. If Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE Type of Well	Do not use this form for proposals to	drill or to deepen or reentry to a different reservoir.	
SUBMIT IN TRIPLICATE Type of Well Cat. Cat.	Use "APPLICATION F	FOR PERMIT—" for such proposals	
Type of Well	SUBMIT IN TRIPLICATE		7. If Unit or CA, Agreement Designation
New Name and No.			
2. Name of Operators / MARKS AND GARNER PRODUCTION, LTD. CO. 3. Address and Telephone No. 3. Address and Telephone No. POB 70 LOVINGTON NM 88260 505 396 5326 4. Location of Wall (Foodage, Sec. T. R. M. or Survey Description) SEC. 33, T16S, R29E 1980 FSL & 990 FSL CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intern Recompletion Recom	1. Type of Well		
2. Name of Operators / MARKS AND GARNER PRODUCTION, LTD. CO. 3. Address and Telephone No. 3. Address and Telephone No. POB 70 LOVINGTON NM 88260 505 396 5326 4. Location of Wall (Foodage, Sec. T. R. M. or Survey Description) SEC. 33, T16S, R29E 1980 FSL & 990 FSL CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intern Recompletion Recom	Oil Gas Other		1
30-015-25090 10. Field and Post of Exploratory Area Signed Location of Well (Frouge, Sec. T. R. M. or Survey Description) SEC. 33, T16S, R29E 1980 FSL & 990 FEL CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Notice of Intent Recompletion Recomple	2. Name of Operator V		
POB 70 LOVINGTON NM 88260 505 396 5326 10. Floid and Pool, or Exploratory Area GREYBURG—JACKSON SEC. 33, T16S, R29B 1980 FSL & 990 FEL 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of fateral Abandonment New Construction Non-Receive French of miles proposed work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations and measured and tree vertical depths for all markers and toxes pertinent to this work. If well is directionally drilled give subsurface locations area drilled give subsurface locations. Including estimated date of starting and pertinent dates. Including estimated date of starting and the foreign of starting and the foreign and the foreign	MARKS AND GARNER PRODUCTION, LTD.CO.		
4 Location of Well (Footage, Sec. T. R. M., or Survey Description) SEC. 33, T16S, R29E 1980 FSL & 990 FEL CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonment Recompletion Now Construction Now Construction Now Construction Now Recompletion Now Recomple	3. Address and Telephone No.		
SEC. 33, T165, R29E 1980 FSL & 990 FEL 12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Recompletion Non-Routine Fricting Non-Routine Fricting Non-Routine Fricting One-Routine Fricting	POB 70 LOVINGTON NM 88260 505 396 5326		」
SEC. 33, T16S, R29E 1980 FSL & 990 FEL 2 CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Abandonnent Change of Plans	4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		
1980 FSL & 990 FEL CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Recompletion Recompletion Recompletion Recompletion Recompletion Non-Routine Fricturing Recompletion or Non-Routine Fricturing Dispose Water Non-Routine Fricturing Non-Routine Fricturing Dispose Water Non-Routine Fricturing Dispose Water Study Dispos			11. County or Parish, State
TYPE OF SUBMISSION TYPE OF ACTION That Abandonment Notice of Intent Recompletion Recompletion Non-Routine Fracturing Water Shut-Off Water Shut-Off Water Shut-Off Water Shut-Off Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Non-Routine Fracturing Water Shut-Off Water Shut-Off Non-Routine Fracturing APPROVED PFTER W. CHESTER CCT 1 1999 BIT REAL CF. AND MANAGEMINT ROSWEL RESOLUCE AREA APPROVED FOR AREA Title MEMBER-PARTNER Date B-9-99 (This space for Federal or State office use) Title Date Date The Amended by Date Date The Amended by Date Date The Amended by Title Date The Order of State office use)	SEC. 33, T16S, R29E		EDDY NEW MEXICO
TYPE OF SUBMISSION Notice of Intent			
TYPE OF SUBMISSION Notice of Intent	CHECK APPROPRIATE BO	X(s) TO INDICATE NATURE OF NOTICE, REPO	RT, OR OTHER DATA
Notice of Intent Abandonment Change of Plans New Construction			
Recompletion New Construction New Construction New Construction Non-Routine Fracturing Plugging Back Non-Routine Fracturing Non-Routine Indicate Fracturing Non-Routine Fracturing	TYPE OF SUBMISSION	TYPE OF ACTION	
Subsequent Report	Notice of Intent	Abandonment	Change of Plans
Gasing Repair Water Shull-Off Conversion to Injection Dispose Water (Note: Repoir results of multiple completion on well conversion to Repetition of Medical Conversion of multiple completion on well conversion on the conversion of multiple completion on well conversion to injection on well conversion to injection of multiple completion on well conversion to injection on well conversion to injection of multiple conversion on well conversion to injection of multiple conversion on well conversion on well conversion of multiple		Recompletion	New Construction
Gasing Repair Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on well conversion to Injection Dispose Water (Note: Report results of multiple completion on well contents)	Subsequent Report	Plugging Back	Non-Routine Fracturing
Other Dispose Water (Note, Report results of multiple completion on Well Completion of Report and Log form 1 3) Describe Proposed or Completed Operations (Clearly state all pertinent dates), 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. If well is directionally drilled. WELL IS TEMPORARILY ABANDONED AND PASSED ANNUAL CASING TEST. WE PLAN TO PERFORATE & PRODUCE THIS IN THE FUTURE APPROVED PFTER W. CHESTER GCT 1 1999 BUREAU CF. AND MANAGEMENT ROSWELL RESOURCE AREA APPROVED FOR MONTH PERIOD ENDING AUG 4 2000 Title MEMBER-PARTNER Date 8-9-99 (This space for Federal or State office use)	_	Casing Repair	Water Shut-Off
(Nous: Report results of multiple completions on Weil of Complicion of Recomplicing Report and Log (Inc.) and give subsurface locations and measured and true vertical depths for all markers and zones perinent to this work. 17 WELL IS TEMPORARILY ABANDONED AND PASSED ANNUAL CASING TEST. WE PLAN TO PERFORATE & PRODUCE THIS IN THE FUTURE APPROVED PETER W. CHESTER GCT 1 1999 BURFAL CF. AND MANAGEMENT ROSWEL. RESOLRCE AREA Title MEMBER-PARTNER Date 8-9-99 (This space for Federal or State office use)	Final Abandonment Notice	Altering Casing	Conversion to Injection
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. WELL IS TEMPORARILY ABANDONED AND PASSED ANNUAL CASING TEST. WE PLAN TO PERFORATE & PRODUCE THIS IN THE FUTURE APPROVED PETER W. CHESTER GCT 1 1999 BUREAU CF. AND MANAGEMENT ROSWELL RESOLRCE AREA Title MEMBER-PARTNER Date 8-9-99 Title Date Date Date Date		Other	
WELL IS TEMPORARILY ABANDONED AND PASSED ANNUAL CASING TEST. WE PLAN TO PERFORATE & PRODUCE THIS IN THE FUTURE APPROVED OCD ARTESIA APPROVED PETER W. CHESTER GCT 1 1999 BUREAU CF. AND MANAGEMENT ROSWELL RESOLRCE AREA APPROVED FOR — MONTH PERIOD ENDING AUG 4 2000 14. I hereby certify that the foregoing is to and parcet Signed			
14. I hereby certify that the foregoing is the and forrect Signed	CASING TEST. WE FUTURE	PLAN TO PERFORATE & PRODUCE THIS OCD ARTESIA APPROVED FOR 12 MONTH PERIOD	APPROVED PETER W. CHESTER CCT 1 1999
Signed	It I hand and the formation is self-and format	ENDING AND # 2000	
(This space for Federal or State office use) Approved by	14. 1 nelective territy that the folegoing is the and correct	L MEMBER-PARTNER	n 8 0 00
Approved by Title Date	Signed	TitleTIDDR-TARTINGK	Date
	(This space for Federal or State office use)		
	Approved by	Title	Date

Title 18 U.S.C. Section 1001, makes 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.