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

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BUREAU OF LAND MANAGEMENT  SUNDRY NOTICES AND REPORTS ON WELL \$2.56.78.9.70  Do not use this form for proposals to drill or to deepen or reentry to a different resolvel.  Use "APPLICATION FOR PERMIT—" for such proposals  SUBMIT IN TRIPLICATE  SUBMIT IN TRIPLICATE  RECEIVED  OCD ARTESIA  I. Type of Well Other  I. Name of Operator  MNA Enterprises Ltd Co  3. Address and Telephone No.  10. Well Other  Address and Telephone No.  10. Field and Pool, or Exploratory Area  Local op. of Well (Foodage, Sec. T. R. M. or Survey Description)  TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  NOICE of Intern  Abandonment  Recompletion  Nouse of Intern  Abandonment  Recompletion  Non-Routine Fricturing  Water Shall-Off  Change of Plans  Non-Routine Fricturing  Water Shall-Off  Overversion to Injection  Dispose Water  Dispose W	orm 3160-5 June 1990)	UI-III	ED STATES		Budget Bureau No. 1004-0135 Expires: March 31, 1993
SUNDRY NOTICES AND REPORTS ON WELL \$56.789 0.  Do not use this form for proposals to drill or to deepen or reently 0 a different resolution.  SUBMIT IN TRIPLICATE  SUBMIT IN TRIPLICATE  SUBMIT IN TRIPLICATE  PRECIVED  NA  I Type of Wall  Qual	June 1990)	BUREAU OF L	ND MANAGEMENT		5. Lease Designation and Serial No.
SUBMIT IN TRIPLICATE    Subsequent Report   Chairs Report   Chairs Report   Conversion to Injections   Conversion to Injections   Conversion and Report   Conversion to Injections   Conversion and Report   Conversion and Report   Conversion and Report   Conversion to Injections   Conversion and Report   Conversion and Report   Conversion to Injection   Conversion to Injection   Conversion and Report   Conversion to Injection   Conv	Do not use this	SUNDRY NOTICES A	ND REPORTS ON W	opour 73	NMI.CO28992a 6. If Indian, Allottee or Tribe Name Ir. NA
Type of Well				JVV 1999 3	
Type of Well		SUBMIT		FIFT IT IT I	
Name of Operator   MNA Enterprises Ltd Co   September   Fight   Figh	ان ان ا	us Other	123/	OCD - MILIES	8. Well Name and No.
Address and Telephone No.  106 W. Alabama, Hobbs, NM 88242 (505)302 2702  Localogue Well (Foodage, Sec., T., R., M., or Survey Description)  11. County or Parish, Sause  Eddy Co, NM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  New Construction  Non-Routine Fracturing  Water Shul-Off  Casing Repair  Conversion to Injection  Subsequent Report  Final Abandonment Notice  Abarding Casing  Other Return to production of measured and true vertical depths for all marters and zones pertinent to this work.)*  Propose to repair flowline, repair well equipment, pull well  and return to production. Plan to have work done by 12-6 —98	2. Name of Operator				
Address and Telephone No.  10. Field and Pool, or Exploratory Area Local Holds 7 rvrs  11. County or Farish, State Eddy Co, NM  12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION  TYPE OF ACTION  Notice of Inter  Notice of Inter  Note: Report Casing Repair  Plugging Back Note-Routine Fracturing  Water Shut-Off Casing Repair  Conversion to Injection Other Return to production  Describe Proposed or Completed Operations (Clearly state all pertinent detail), and give pertinent dates, including estimated date of starting any proposed work. If well is directionally  Propose to repair flowline, repair well equipment, pull well and return to production. Plan to have work done by 12-6 —98			30-015-04294		
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA   TYPE OF SUBMISSION   TYPE OF ACTION					
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA  TYPE OF SUBMISSION    Abandonment   Change of Plans	106 W. 4 Location of Well (Fo	Alabama, Hobbs,	NM 88242 (50 scription)	15)392-2702	Loco Hills 7 rvrs 11. County or Parish, State
TYPE OF SUBMISSION    Abandonment			731/5 3	30/4/	
TYPE OF SUBMISSION    Abandonment		W ABBRODRIATE BOY	N TO INDICATE NAT	URE OF NOTICE, RE	PORT, OR OTHER DATA
Abandonment   Change of Plans   New Construction   New Construction   New Construction   Non-Routine Fracturing   Plugging Back   Non-Routine Fracturing   Water Shut-Off   Conversion to Injection   Altering Casing Repair   Conversion to Injection   Other Return to production   Dispose Water   (New: Repen masks of muskiple completions or Recompletion or Recompletion Report in the subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*  Propose to repair flowline, repair well equipment, pull well and return to production. Plan to have work done by 12-10 -98			5) 10 110/07/12 1	TYPE OF ACT	TION
Notice of Intern   New Construction   New Construction   Non-Routine Fracturing   Non-Routine	TYPE	OF SUBMISSION			
Subsequent Report	No.	nice of Intent			
Casing Repair   Conversion to Injection					Non-Routine Fracturing
Altering Casing    Conversion to Injection   Conversion to Injection	Su	bsequent Report	1 —		
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 give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*  Propose to repair flowline, repair Well equipment, pull Well and return to production. Plan to have work done by 12-16 —98	☐ Fi	nal Abandonment Notice	Alterina	Casing	Dispose Water    Dispose Water
Propose to repair flowline, repair well equipment, pull well and return to production. Plan to have work done by 12-10 -98					Completion or Recompletion Report and Log form.)
and return to production. Plan to have work done 27/2-0	give subsuri	CE IOCATIONE AND INCASCION AND THE	•		
PERER W CHES	ā	Propose to repaind return to pro	ir flowline, reduction. Plan	pair well equi to have work	pment, pull well done by /2-6 -98
PERER W CHES					
PrizeR w CHFS					
POTER W CHES					
Philips Willes					ALCON DECEMBER
					PHIER W CHESTER

14 I hereby certify that the foregoing is true and correct (This space for Federal or State office use) Date Title Approved by Conditions of approval, if any:

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.

RECEIVED