- NM OIL CONS COMMISSION Drawer DD Artesia. NM 88210

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orm 3160-5	UNI	TED STATES			FORM APPROVED				
une 1990)	DEPARTMENT OF THE INTERIOR				Budget Bureau No. 1004-0135 Expires: March 31, 1993				
	BUREAU OF I	LAND MANAGEMI	ENT			Designation and Se		· ·	
					$\perp_{\text{LC-C}}$	28793A			
	SUNDRY NOTICES		· · · · · · · · · · · · · · · · · · ·			lian, Allottee or Tril	be Nam	ie	
Do not use th	is form for proposals to dr Use "APPLICATION FOI								
SUBMIT IN TRIPLICATE						7. If Unit or CA, Agreement Designation			
1. Type of Well					- NIMININ	(00525V			
Oil Gas Well Other						NMNM88525X 8. Well Name and No.			
2. Name of Operator			Î	RECEIVED	Burc	h Keelv III	oit.	#225	
	ergy Corporation				9. API W	<u>th Ke</u> e1y_Ur ^{7ell No.}	1,10	<u> </u>	
Address and Telepi	hone No.				30-0	15-27645			
P. O. Drawer 217, Artesia, NM 88210 505-7MAY-3393q4						10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R., M., or Survey De	escription)			Grbg	Jackson SI	R O	Grbg SA	
				O. C. D.		ty or Parish, State			
330 FNL 330 FEL, Sec. 19-T17S-R30E Unit A ARTESIA, OFFICE									
					Eddy	County, N	M		
2. CHE	CK APPROPRIATE BOX(s) TO INDICATE N	NATURE OF	NOTICE, REPO	RT, OR	OTHER DAT	ГА		
	TYPE OF SUBMISSION TYPE OF ACTION								
∑ I-No	otice of Intent	☐ Ab	pandonment		Ct	nange of Plans			
·		Re	completion		☐ Ne	ew Construction			
☐ Su	ibsequent Report	Pli	ugging Back		□ No	on-Routine Fracturin	ıg		
		Ca	sing Repair		\square w	ater Shut-Off			
L ⊢ Fi	inal Abandonment Notice	L Alr	tering Casing		☐ c₁	onversion to Injectio	n		
		kx ou	her <u>change</u>	from lease to		ispose Water			
				unit.		Report results of multiple tion or Recompletion Re			
3. Describe Proposed	or Completed Operations (Clearly state al ce locations and measured and true vertice	I pertinent details, and give per	ertinent dates, includ	ling estimated date of startin	g any propos	ed work. If well is d	lirection	ally drilled,	
give subsurfac	ce locations and measured and true vertice	an depens for all markers and	i zones pertinent to	this work.)*					
	Change from	Burch AA Fe	deral #36						
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						The Wall	14	ance	
14. I hereby certify th	hat the foregoing is true and correct					0			
Signed _50	sugmeta	TitlePr	oduction (Clerk	D	ate <u>4/19/94</u>			
(This space for Fo	ederal or State office use) rig Signed by Shannon J. Shaw	p.f	TOOI EILL	ENGINEER		c/11/	01		
Approved by		Title PE	. I KULEUM		D	ate			
Conditions of app	orovai, ii 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.