UII Yons.

orm 3160-3 August 1999)	DEPARTMEN F THE INTERIOR BUREAU OF LAND MANAGEMENT	N.M. <sup></sup> ' 1301 W. Gr	V-Dist. 2	res November 30, 2000	43 r
CII	NDRY NOTICES AND REPORTS ON WELLS	Artesia, N	JM 88210	1	
Do not u	se this form for proposals to drill or to re-enter ed well. Use Form 3160-3 (APD) for such proposa	ал	6. If Indian, Allottee or Tribe Name		
SUBMIT I	N TRIPLICATE - Other instructions on revers	e sid <b>e</b>	7. If Unit or Ca	A/Agreement, Name and	/or No.
Type of Well		c 293031	1		
🛚 Oil Well 🔲 Gas W	ell Other	8. Well Name and No.			
2. Name of Operator		DALE H. PARKE D #10			
PREMIER OIL	& GAS, INC.	1100 000 C	9. API Well N		
3a. Address PO ROY 1246	3b. Phone No. (inclusion) 3b. ARTESIA, NM 88211-1246 5056748-	DANA = WED	30-015-	31201 ool, or Exploratory Area	
	re, Sec., T., R., M., or Survey Description)	OCD - ARTESIA	<b>1</b> 0 /	ILLS PADDOCK	
	FEI CEC 15 TITC DOOR	OCD - W.	11. County or P		
2400 FSL 330	FEL, SEC. 15-T17S-R30E				
	A A DEPONDED DOVING TO INDICATE NATIONAL PROPERTY OF THE PROPE	St CL 91 SVV CV		O. NM	
12. CHEC	K APPROPRIATE BOX(ES) TO INDICATE NATU	RE OF NOTICE, RE	EPORT, OR O	THER DATA	
TYPE OF SUBMISSIC	N T	YPE OF ACTION			
	Acidize Deepen	Production (Start/	/Resume)	Water Shut-Off	
Notice of Intent	Alter Casing Fracture Treat	Reclamation		Well Integrity	
Subsequent Report	Casing Repair New Construction	☐ Recomplete	Ø	Other INTERMED	IATE
	Change Plans Plug and Abandon	Temporarily Aba	andon	CSG, CMT	
Final Abandonment No	Convert to Injection Plug Back	Water Disposal			
If the proposal is to deeper Attach the Bond under we following completion of testing has been complete.	npleted Operation (clearly state all pertinent details, including est in directionally or recomplete horizontally, give subsurface location hich the work will be performed or provide the Bond No. on file he involved operations. If the operation results in a multiple content of the content of the performed of the filed only after all required for final inspection.)	ons and measured and true with BLM/BIA. Require apletion or recompletion is	e vertical depths o red subsequent rep in a new interval, a	of all pertinent markers a corts shall be filed within a Form 3160-4 shall be f	ind zones n 30 day filed once
TD 12 1	/4" HOLE @ 10:30 PM ON 4/15/02. DR	LD 12 1/4" HOL	E TO 1239'	, RAN	
28 JTS	(1221') 8 5/8" 24# J55 CSG TO 1237'	, CMTD W/ 400	SX H/L, TA	ILED	
W/ 200	SX P+, PLUG DOWN @ 3:15 AM ON 4/16/6	D2, CIRC 94 SX	TO PIT.	WOC	
10 1123,	TESTED CSG TO 1500# FOR 30 MIN - H	ELD UK.			
				AFR DE COMPONE	

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Title PRODUCTION ANALYST Date Signature APRIL 17, 2002 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Title Date 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. Office

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.