

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTN.M. Oil & Gas Division
811 S. 1st Street
Artesia, NM 88210-2834FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

C/SF

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

FED LCO 67132

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on reverse side

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

DAVID HAMMOND

3a. Address

PO BOX 1538 ARTESIA, NM

3b. Phone No. (include area code)

(505) 748-3993

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

LETTER D 330 FNL 330 FWL
S27 T185 R29E

8. Well Name and No.

DENTON A#1

9. API Well No.

30-015-03464

10. Field and Pool, or Exploratory Area

TURKEY TRACK Q-GB-SA

11. County or Parish, State

EDDY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

1. Circulate hole with salt water gel.
2. Pump 25 sx cement plug on top of CIBD set at 1980'. Allow to set and tag.
3. ~~Set 100' cement plug from 418' to 318' with 25 sx of cement.~~
4. ~~Set 50' cement surface plug with 10 sx of cement.~~
5. Well will be plugged as soon as approved.

PERF 4 1/2" CSG @ 418' & CIRC CEMENT BEHIND
CASING AND FILL TO SURFACE.

APPROVAL SUBJECT TO**GENERAL REQUIREMENTS AND
SPECIAL STIPULATIONS ATTACHED**14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

DAVID HAMMOND

Title OPERATOR

Signature

Date JUNE 10, 2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

(ORIG. SGD.) ALEXIS C. SWOBODA

PETROLEUM ENGINEER

Date JUN 14 2001

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.