

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

CISF

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.

Oil Cons.
N.M. Div-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Read & Stevens, Inc.

3a. Address **P. O. Box 1518
Roswell, NM 88202**

4. Location of Well (Footage, Sec. T., R., M., or Survey Description)
**Section 12 T18S-R30E
660' FNL & 1500' FEL**

3b. Phone No. (include area code)
505-662-3770

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

8. Well Name and No.

Arena 12 Federal Com #1

9. API Well No.

30-015-31972

10. Field and Pool, or Exploratory Area

Cedar Lake Morrow

11. County or Parish, State

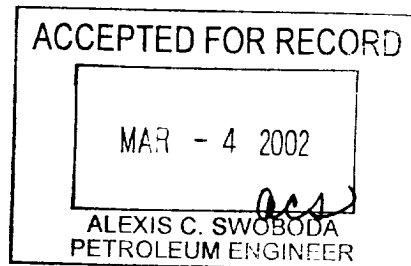
Eddy County, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Csg/Rls Rig
	<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 recompleat 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 recompleat 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.)

12/08/01 Ran 245 jts 5 1/2" N-80 & S-95 csg, FS @ 11,753', FC @ 11,667'.
Cmt w/ (lead) 650 sx Interfill H, (tail) 240 sx Super H w/ 0.5%
Halad-344, 0.4% CFR-3, 1# salt, 0.2% HR-7, displace w/ 273 bbls
fresh wtr, plug down. Release rig @ 6:00 PM 12/09/01.



14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

John C. Maxey, Jr.

Title **Operations Manager**

Signature

Date

2-26-02

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Date

Office

RECEIVED

2002 FEB 28 AM 8:44

SURF & TOWNSHIP
HOSPITAL OFFICE