Form 3160-5 (November 1994)

Production.

## UNITED STATES

811 S. 1st Str Artesia, NM 85210-2834

N.M. UII VUIIS. DIVISIVII

FORM APPROVED CISIC COMB No. 1004-0135 Expires Indicates

 OMB No. Expires Ju	1004	013

	Expires July 31, 1996				
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS			5. Lease Serial No.		
SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to re-enter an			LC 062085		
abandoned well. Use Form 3160-3 (APD) for such proposals.			6. If Indian, Allottee or Tribe Name		
SUBMIT IN T	RIPLICATE - Other Ins	tructions on reverse	side	7. If Unit or CA/Agreement, Name and/or No.	
I. Type of Well  Oil Well Gas Well	Other			8. Well Name and No.	
2. Name of Operator	Fed. F # 2				
SOX Resour	ces, Inc.	3b. Phone No. (includ		9. API Well No.	
3a. Address 8.0. Box 5061 N	300/505/656 10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Shugart - Vata TR. Ox 61	
Sec. 31 T185 R31E 660 FNL + 1980 FEL				Shugart - Yat 7 7 P. Qv 66 11. County or Parish, State	
				Eddy Co. N.M.	
12. CHECK AF	PROPRIATE BOX(ES)	TO INDICATE NATU	RE OF NOTICE, R	REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	☐ Acidize	Deepen Deepen	Production (Star	rt/Resume)	
	☐ Alter Casing	Fracture Treat	Reclamation	☐ Well Integrity	
Subsequent Report	Casing Repair	☐ New Construction	☐ Recomplete	Other	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporarily At	pandon	
	Convert to Injection	Plug Back	Water Disposal		
testing has been completed. Fi determined that the site is ready	olved operations. If the operational Abandonment Notices shall for final inspection.)	ion results in a multiple com Il be filed only after all requi	pletion or recompletion rements, including recl	ired subsequent reports shall be filed within 30 days in a new interval, a Form 3160-4 shall be filed once amation, have been completed, and the operator has	
	78820				
	OCH RECEIVED ARTERIA	AC	CEPTED FOR R E. SGD.) DAVIL MAR 9 200	TR. GLASS	
14 Thereby certify that the foregoin Name (Printed Typed)  Chuck M	or 19 and correct	Title	Ergr.		
Signature hunk	non	Date	3/3/5	000	
	THIS SPACE	FOR FEDERAL OR S			
Approved by		Ti	tle	Date	
Conditions of approval, if any, are	attached. Approval of this no		ffice		
<b>Approval Subject To</b>	Putting Well On	ne subject lease			
Production And Keep	ing Well On	and willfully to mak	e to any department or	agency of the United States any false fictitious of	