Form 3160-5 (June, 1990)

UNITED STATES DEF **IMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT**

FORM APPROVED

Artesia, M 88210

Budget Bureau No. 1004-0135

Expires: March 31, 1993

SUNDRY NO	TICES AND REPORTS ON WELLS	5. Lease Designation and Serial No. NM 46275
Do not use this form for proposals to drill, or to deepen or reentry to a different reservoir.		6. If Indian, Allotte or Tribe Name
·	DN FOR PERMIT——* for such proposals	
	SUBMIT IN TRIPLICATE	7. If Unit or CA, Agreement Designation
1. Type of Well		
X Oil Well Gas 2. Name of Operator	Well Other 4 199 Christine Pickart	8. Well Name and No. Burton Flat B Federal No. 2
Presidio Oil Company 🗸	Phone: (303) 850-1824	9. API Well No.
3. Address and Telephone No.		30-015-24702
5613 DTC Parkway, Ste 750, I	P.O. Box 6525, Englewood, CO 80155-6525	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, T, R, M, or Survey Description)		Avalon - Bone Springs, East
407' FNL & 660' FWL		11. County or Parish, State
Section 1-T21S-R27E		Eddy County, NM
	X(s) TO INDICATE NATURE OF NOTICE, REPORT	T, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
	Abandonment	Change of Plans
Notice of Intent	Recompletion	New Construction
	Plugging Back	Non-Routine Fracturing
Subsequent Report	Casing Repair	Water Shut - Off
	Altering Casing	Conversion to Injection
Final Abandonment Notice	X Other: CHANGE OF OPERATOR	Dispose Water
		(Note: Report results of multiple completion on Well
	ons and measured and true vertical depths for all markets and zones pe nd 43 CFR 3162.3 we are notifying you of a chang	•
-	or, accepts all applicable terms, conditions, stipula the lease or portion of lease described.	ations and restrictions
Dece: 41:0 01:00 - 11:00 - 11:00		AR CA
rresidio Oli Company meets Federal I	bonding requirements as follows (43 CFR 3104)	
Bond Coverage: \$25,000 Insur	rance Company Wastakastas Fire Inc.	
Bolid Coverage, \$25,000 Insur	rance Company: Westchester Fire Insurance Com	
BLM Bond File No.: 6101907849		20
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The effective/date of this charge is	November 1, 1993 at 7:00 am MDT.	रू पु
14. I hereby certify that the foregoing is true and correspond: D. Steve Tipton, P.E.	Mid-Continent & Gulf Coast Title: Operations Manager	Date: 2/8/G 4
(This space for Federal or State office use)	The second secon	
Approved by:	Title: ACCETABLE	Date:
Conditions of approval, if any:	man as a second of the second	

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.