	•			
	\$		N.M	vision c151
Form 3160-5	I I I I I I I I I I I I I I I I I I I			713101: C[71
(June 1990)	UNITED	STATES		FORM APPROVED
	DEPARTMENT O	F THE INTERIOR	4/	0-23 Britiet Bureau No. 1004-0135
	BUREAU OF LAN	D MANAGEMENT		Expires: March 31, 1993
CHAIDDY MOTIOTO				5. Lease Designation and Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS  Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.  Use "APPLICATION FOR PERMIT—" for such parts of the such parts.				N/1-56520
116	"APPLICATION TO THE	to deepen or reentry to	a different reservoir	6. If Indian, Allottee or Tribe Name
	e "APPLICATION FOR PE	RMIT—" for such proper	osals	•
	SUBMIT IN	TRIPLICATE		7 If Visit on CA
I. Type of Well		THII LIOATE	•	7. If Unit or CA, Agreement Designation
Oil Gas Well Well				
2. Name of Operator	Other			8. Well Name and No.
				<del> </del>
Louis Dreyfus Natural Gas  3. Address and Telephone No.				Sheendraw "28" #13 9. API Well No.
	inge Plane Calle Co.			<del></del>
14000 Quail Springs Pkwy, Suite 600, Oklahoma City, OK 73134  4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				3001529532 10. Field and Pool, or Exploratory Area
1650' FSL & 330'	FUT.	on)		DAPIOLALOTY AICS
Section 28, T 22				11. County or Parish, State
20, 1 22	,D, R ZUE			
2. CHECK AR	IDDODDIATE DOM		<del></del>	Eddy County, NM
OTILOR AP	PROPRIATE BOX(s) TO	INDICATE NATURE	OF NOTICE, REPO	BT. OR OTHER DATA
TYPE OF SUI	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR			
Notice of Int		TYPE OF ACTION		
- Notice of Int	ent	Abandonment		Change of Plans
Subsequent R		Recompletion		New Construction
Subsequent K	.eport	Plugging Back		1-1
Circl At 1		Casing Repair		Non-Routine Fracturing Water Shut-Off
Linal Abando	onment Notice	Altering Casing		[7]
		X Other H2S H	Report	Conversion to Injection
1 Describe B				Dispose Water (Note: Report results of multiple completion on W
give subsurface locations	ed Operations (Clearly state all pertinen	t details, and give pertinent dates, in	cluding estimated date of starting	(Note: Report results of multiple completion on W Completion or Recompletion Report and Log for g any proposed work. If well is directionally dri
	and measured and true vertical depths	for all markers and zones pertinen	t to this work.)*	g any proposed work. If well is directionally dri
In compliance wi	ith Onshore Order No	0 6 this 11	1 /	
Sulfide Gas.	CLOROLE OLUCI NO	o, chis well br	oduces (H2S). Hy	ydrogen
Measurements ind	licate 65,011 ppm H2	S in the eas stre	am.	
		Bao bere	CIM •	
100 ppm R.O.E.				
500 ppm R.O.E.	= 25.5 ft.			
A C MCD/D				
@ 6 MCF/D		400		82 gg
		ACCEPTED FO	R RECORD	T.:
			D.) DAVID R GLAS	
		JUN O	2 1000	<b>5</b>
		1 0014 0 3	ון סכט ע	٠.,
		BLM		<b>5</b> -i
		<del> </del>		
				(2) (5) (7) (7) (7) (7) (7) (7) (7) (7) (7) (7
I hereby certify that the foregoing	ng is true and a			-
\ <b>*</b> /	ing is true and correct			
Signed OSMU	1. alllu	Title Environmental	& Safety Direct	tor 5-26-98
(This space for Pederal or State	office use)			Date
Approved by				
Conditions of approval, if any:		Title	··	Date

Fitle 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.