Form 3160-5 (June 1990)

UNIT LA STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED	
Budget Bureau No. 1004-013	3
Expires: March 31, 1993	

5. Lease Designation and Serial No.

SUBMIT IN TRIPLICATE 1. Type of Well	Do not use this form for proposals to dri Use "APPLICATION FOF	If Indian, Allottee or Tribe Name If Unit or CA, Agreement Designation		
Name of Operator Name of Ope				
AAPTWALE PETROLEUM CORPORATION (505) 748-1471). Address and Telephone No. 10. Address and Telephone No. 10. South 4th St., Artesia, NM 88210 4. Location of Well (Footage, Sec., T. R., M., or Survey Description) Unit H., 1980 FNL & 660 FEL, Sec. 33-T215-R30E 10. Field and Fool, or Exploratory Area Undes J. Delayware 11. County or Fritin, Sure 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION 13. Describe Proposed or Completed Operations (Clearly sale all pertinent details, and give pertinent dates, including estimated date of starting my proposed wert. If well a directionally defilled, give subsurface Doctions and measured and true vertical depols for all markers and zones pertinent to this work.)* 14. Lacredy certify that the foregoing is troughly correct 15. Describe Proposed or Completed Operations (Clearly sale all pertinent details, and give pertinent dates, including estimated date of starting my proposed wert. If well a directionally defilled, give subsurface Doctions and measured and true vertical depols for all markers and zones pertinent to this work.)* REPORT 1ST PRODUCTION 7-19-92. 14. Lacredy certify that the foregoing is troughly correct Title Production Supervision Title Date Date 15. Describe Proposed by Completed of Special Correct Title Date Date 16. Describe Proposed or Completed Operations (Clearly sale all pertinent details, and give pertinent dates, including estimated date of starting my proposed wert. If well is directionally defilled, give subsurface Doctions and measured and true vertical depols for all markers and zones pertinent to this work.)* Report 1st production Supervision Date Title Date Date 14. Lacredy certify that the foregoing is troughly correct Title Date Date The Production Supervision Date Date The Producti	I. Type of Well Oil Well Well Other			
3. Address and Telephone No. 105 Scutch 4th St., Artesia, NM 88210 4. Location of Well (Focuse, Sec. 7. R. M., or Survey Description) Unit H. 1980' FNL & 660' FEL, Sec. 33-T215-R30U 10. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF SUBMISSION Notice of Intent Notice of Intent New Construction New Constru	•	(505) 748	3–1471)	
10. Field and Pool, or Eugherntony Area Unders. Delayware Eddy, NM (Delay Delayware Eddy, NM) 12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent Recompletion Recompletion Recompletion Plagging Back Casing Repair Casing Repair Ablating Casing Repair Albating Casing Repair Albating Casing Repair Dispose Water State-Off Conversion to Injection Under 13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give perfinent dates, including estimated date of starting any proposed work, if well is directionally drilled, give subsurface locations and measured and croc vertical depths for all markers and zones perfinent to this work.)* REPORT 1ST PRODUCTION 7-19-92.			RECEIVED	
Unit H, 1980' FNL & 660' FEL, Sec. 33-T21S-R30E Control Contr	105 Scuth 4th St., Artesia, N	м 88210		10. Field and Pool, or Exploratory Area
Unit H, 1980' FNL & 660' FEL, Sec. 33-T21S-R30E Eddy, NM CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION Notice of Inent Abandonment Recompletion Non-Route Fracturing New Construction N	4. Location of Well (Footage, Sec., T., R., M., or Survey De-	scription)	11 0.819 92	
TYPE OF SUBMISSION TYPE OF ACTION Notice of Intent	Unit H, 1980' FNL & 660' FEL,	Sec. 33-T21S-R30E		
TYPE OF SUBMISSION Notice of Intent				
Notice of Intent) TO INDICATE NATURE		T, OR OTHER DATA
Recompletion New Construction New Construction Non-Routine Fracturing Non-Routine Fractu	TYPE OF SUBMISSION		TYPE OF ACTION	
Subsequent Report	Notice of Intent	Abandonment		Change of Plans
Casing Repair Water Shut-Off Conversion to Injection Dispose Water Conversion to Injection Dispose Water Conversion of Conversion to Injection Dispose Water Conversion of Conversio		Recompletion		New Construction
Final Abandonment Notice Altering Casing Onher IST PRODUCTION Dispose Water (Note, Export results of multiple completion on Well Completion or Recompletion Report and Log form) 13. Describe Projosed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical deepths for all markers and zones pertinent to this work.)* REPORT 1ST PRODUCTION 7-19-92.	X Subsequent Report	Plugging Back		Non-Routine Fracturing
Source Section Dispose Water Dispose W		Casing Repair		
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* REPORT 1ST PRODUCTION 7-19-92. 14. I hereby certify that the foregoing is true(s)id correct Step 1	L_ Final Abandonment Notice	Altering Casing Other 1ST	PRODUCTION	Dispose Water (Note: Report results of multiple completion on Well
Signatura Aproved by Title Title Date	REPORT 1ST PRODUCTION	7-19-92.		
Signatura Aproved by Title Title Date				
Title Production Supervisor Option Space for Federal or State office use) Approved by				
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Approved by Title Date Conditions of approval, if any:	14. I hereby certify that the foregoing is true and correct	Title Production	Supervisor	Date 7-21-92
Conditions of approval, if any:	This space for Federal or State office use)			
Conditions of approval, if any:	Approved by	Title		Date

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	Title 18 U.S.C. Section 1001, makes it a crime for any person I	knowingly and willfully to make to any der	partment or agency of the United	States any false, fictitious or fraudulent statements