Form 3160-5 (August 1999)

U.S. ED STATES DEPARTMENT OF THE INTERIOR

N.M. Oil (ns. Division 811 S. 1st Street

Artesia NM 88210-28xeirs: November 30, 2000

BUREAU OF LA	ND MANAGEMENT ATTE	
	Case Well Other	
SUBMIT IN TRIPLICATE -	Other instructions on reverse side	7. If Unit or CA/Agreement, Name and/o
1. Type of Well		8. Wall Name and No.
X Oil Well Gas Well Other 2. Name of Operator		North Pure Gold
Santa Fe Snyder Corporation		
3a. Address		nclude area code) 30-015-27178
_		ourid Buries, Nest (Berundi
10 OUTOK APPROPRI	ATE DOV(EQ) TO INDICATE MATURE	
	ATE BUX(ES) TO INDICATE NATURE	
TYPE OF SUBMISSION		TYPE OF ACTION
Notice of Intent	Acidize Deepen	Production (Start/Resume) Water Shut-Off
Y Subrequent Percent	Alter Casing Fracture Tr	reat Reclamation Well Integrity
A Subsequent Report	Casing Repair New Constr	ruction Recomplete Other Add Pe
Final Abandonment Nouce	.bandon Temporarily Abandon in the same	
	Convert to Injection Plug Back	Water Disposal formation
If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be per following completion of the involved operations. If testing has been completed. Final Abandonment N determined that the final site is ready for final inspection	lete horizontally, give subsurface locations ar formed or provide the Bond No. on file wi the operation results in a multiple completion otices shall be filed only after all requirement.)	nd measured and true vertical depths of all pertinent markers and ith BLM/BIA. Required subsequent reports shall be filed within 30 m or recompletion in a new interval, a Form 3160-4 shall be filed pents, including reclamation, have been completed, and the operated
	g set @ 7703' & 2 1/2" X 1 1/	/4" X 22' HVRC pump and rods.
Rig Down and return well to Pro	oduction	
	S OCD ARTESIA	
		The same of the sa
		S ON WELLS **To re- ontor an varioh proposals** **In the control of the control
14. I hereby certify that the foregoing is true and correct	Title	
Name (Printed/Typed) Bill Keathly	F	Regulatory Specialist
Bis Kowkly		
	S SPACE FOR FEDERAL OR STA	TE OFFICE USE
Approved by	Title	Date
Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations thereo	those rights in the subject lease	

OCT 1 ± 2000 HOWELL, MAI