

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

15F

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.
Oil Cons. N.M. Div-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

SUBMIT IN TRIPLICATE - Other instructions on reverse side

| | | |
|---|--|---|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 7. If Unit or CA/Agreement, Name and/or No. |
| 2. Name of Operator Read & Stevens, Inc. | | 8. Well Name and No. Crystal Federal #2 |
| 3a. Address P. O. Box 1518 Roswell, NM 88202 | 3b. Phone No. (include area code) 505/622-3770 | 9. API Well No. 30-015-31807 |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 2375' FNL & 660' FEL Section 4 T24S-R26E | | 10. Field and Pool, or Exploratory Area Carlsbad Morrow South |
| | | 11. County or Parish, State Eddy |

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

| TYPE OF SUBMISSION | TYPE OF ACTION | | | |
|---|---|--|--|---|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Final Abandonment Notice | <input type="checkbox"/> Casing Repair | <input checked="" type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | Csg/Cmt |
| | <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

08/14/01 MIRU Tmbr-Sharp rig #6, spud well @ 7:30 AM CST 8/14/01.

08/15/01 Drill 17 1/2" hole to 510' TD. Ran 14 jts 13 3/8" 54.5# & 48# J-55 csg, set @ 510'. Cmt w/ 525 sx Premium PLs, 2% CaCl. Circ cmt to pit. WOC 18 hrs, continue drlg operations.

08/25/01 Drill 12 1/4" hole to 3,725' TD. Ran 82 jts 9 5/8" 40# K-55 csg, set @ 3,725'. Cmt w/ 725 sx Interfill C neat, tail w/ 200 sx Premium Plus, 2% CaCl, circ 115 sx cmt to pit. WOC 18 hrs, continue drlg operations.

10/03/01 Drill 8 3/4" hole to 12,050' TD. Ran 39 jts 5 1/2" 17# S-95 LTC & 234 jts 17# N-80 LTC csg, set @ 12,050'. Cmt 1st stage lead 930 sx Interfill H w/ 0.1% HR-7, tail w/ 240 sx Super H, 1# salt, 0.5% Halad R-344, 0.4% CFR-3, 0.2% HR-7, 5# sx gilsonite, displace w/ fresh wtr, recovered trace of cmt. Cmt 2nd stage lead w/ 450 sx Interfill H, tail w/ 100 sx Premium cmt, displace w/ fresh wtr, plug down. NUWH, test to 5,000 psi, clean pits. Rig released @ 5:00 PM 10/04/01.

14. I hereby certify that the foregoing is true and correct
Name: Printed/Typed

John C. Maxey, Jr.

Title **Operations Manager**

Signature

Date **11-12-01**

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office