Form 3160-5

TED STATES

OCD-Artesia

FORM APPROVED
Budget Bureau No. 1004-0135

(November 1994)	DEPARTMENT OF THE INTERIOR			Expires July 31, 1996				
	BUREAU OF L	AND MANAGEME	NT		5. Lease Seria	l No.		
SUNDRY NOTICES AND REPORTS ON WELLS 5678910717					LC-063136-A			
ı	Do not use this form for p	proposals to drill or to	re-enter an	63	6. If Indian, A	llottee or Tribe	Name	
ab	andoned well. Use Form	3160-3 (APD) for so	ich/proposals.	TO TAIS				
			7200		7. If Unit or C	A/Agreement, I	Name and/or No.	
SU	BMIT IN TRIPLICATE -	Other instructions on	192 010-011		Poker Lake	Unit		
1. Type of Well			15 OCD - WILL	78 79	8. Well Name	and No		
X Oil Gas Well Well	Other		102		Poker Lake		# 57	
2. Name of Operator	Production Co		J3542526	22,0	9. API Well N	<u> </u>		
1. Type of Well X Oil						30-015-24269		
P.O. Box 2760, Midland, TX 79702-2760 (915) 683-2277						10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage,	Sec., T., R., M., or Survey Descrip	etion)			Big Sinks	(Delaware)	
330' FSL & 1980'	FWL, Unit Letter N				11. County of	Parish. State		
Section 28, I24S					Eddy		NM	
		ATE DOV(ES) TO IND	CATE NATURE OF NOT	ICE REPORT		ATA		
12	. CHECK APPROPRI	ATE BOX(ES) TO IND			, 011011121101	-		
TYPE OF S	UBMISSION	TYPE OF ACTION						
X Notice of	Intent	Acidize	Deepen	Productio	n (Start/Resume)	Water S	hut-Off	
بن		Alter Casing	Fracture Treat	Reclamati	on	Well Inte	grity	
Subsequent Report		Casing Repair	New Construction	Recomple	ete	Other _		
		Change Plans	Plug and Abandon	Х Тетрога	ily Abandon			
Final Ab.	andonment Notice	Convert to Injection	Plug Back	Water Di	sposal			
							hursting thereof	
If the proposal is to Attach the Bond und- following completion testing has been con- determined that the fin	Coommpleted Operation (clear deepen directionally or recomp er which the work will be per of the involved operations. If npleted. Final Abandonment N al site is ready for final inspection	formed or provide the Bot the operation results in a otices shall be filed only	nd No. on file with BLM/B multiple completion or reco- after all requirements, inclu-	IIA. Required s impletion in a n iding reclamation	ubsequent reports ew interval, a Fo n, have been co	shall be filed orm 3160-4 sha mpleted, and t	within 30 days	
referenced we	ses Production Co. 1 11. This well will an SWD well at a la o ensure that no po	be evaluated for ster date. Until	then annual mecha ists.	nworkover anical into	, recompletegrity test	1011, S		
Upon approval results filed	to extend TA statuments to the statument of the BLM.	s, a mechanical i	ntegrity test will	l be sched	uled and th	e		
14. I hereby certify that the Name (Printed/Typed) Tami Wilbe	foregoing is true and correct		Title Product	tion Clerk				
A o	111711-		Date 3/18/02					
oumi	Wilber	C CDACE EOD EEDS	RAL OR STATE OFF	FICE USF		<u> </u>		
			Title		1	Date / 1	1 00	
	ORIG. SGD.) JOE any, are attached. Approval			layer Fari	10 dag	5/2/	<u> </u>	
cortify that the applicant	holds legal or equitable title t licant to conduct operations thereo	o those lights in the subject	cct lease CFC) 				