Form 3160-5 (August 1999)				FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000  5. Lease Serial No.	
SUNDRY NOTICES AND REPORTS ON WELLS				14-2	0-603-2584
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If India	n, Allottee or Tribe Name
2018, MAY 21				Na	vaso
SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit	or CA/Agreement, Name and/or No.
1. Type of Well					
Ø Oil Well ☐ Gas Well ☐ Other				8. Well Name and No.	
2. Name of Operator				C-1	
HAST Oil & GAS INC  3a. Address  3b. Phone No. (include area code)				9. API Well No.	
0. Box 385 Rongely CD 8/648 (970) 629-11/6				300 45 11 35 8  10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				Hoiseshoe callup	
2310 FSL + 660' FWL					or Parish, State N.M.
Sec 24 T32N R18W				Son	. Ivan County N
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA					
TYPE OF SUBMISSION	TYPE OF ACTION				
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start	/Resume)	Water Shut-Off Well Integrity
Subsequent Report	Casing Repair	New Construction	☐ Recomplete		Other
	Change Plans	Plug and Abandon	Temporarily Aba	andon	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
If the proposal is to deepen dire Attach the Bond under which the following completion of the inv	ctionally or recomplete horizont he work will be performed or produced operations. If the operational Abandonment Notices shall for final inspection.)	ally, give subsurface locatio ovide the Bond No. on file on results in a multiple comp be filed only after all requi	ons and measured and tru with BLM/BIA. Requir pletion or recompletion i rements, including recla	e vertical dep ed subsequen in a new inter mation, have	york and approximate duration thereof. this of all pertinent markers and zones. It reports shall be filed within 30 days val, a Form 3160-4 shall be filed once been completed, and the operator has
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Plus or pr	oduce by	16-51-	- 06.	÷	S JUNIONS
				.:	WEST COLOR

P.

14. I hereby certify that the foregoing is true and correct
Name (PrintedTyped)

Andrew B. Saied

Title President

Signature B. For FEDERAGOR STATE OFFICE USE

Approved by

Title

Title

Date 5-30-06

Title

Date JUN 0 2006

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.