	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT			FORM APPROVED OMB No 1004-0137 Expires: March 31, 2007  5. Lease Senal No.
SUNDRY Do not use th abandoned we	NM081208 AM 1235  6 If Indian, Allbuce of Tribe Name  7. If Unit or CA/Agreement, Name and/or No.  Bureau of Land Management  8. Well Name and No.  South Hospah Unit #30  9. API Well No.			
SUBMIT IN TRI  . Type of Well    ✓   Oil Well   □   □				
. Name of Operator Nacogdoches Oil & Gas				
a Address P. O Box 632418 Nacogodoches Location of Well (Footage, Sec., 7 950' FNL & 1980' FEL S		3b Phone No. (include 936-560-4747	area code) しょう	300312021  10. Field and Pool, or Exploratory Area  V. South Hospah Unit  11. County or Parish, State  Mckinley, New Mexico
12. CHECK AF	PROPRIATE BOX(ES) T		E OF NOTICE, I	REPORT, OR OTHER DATA
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Fracture Treat New Construction Plug and Abandon Plug Back	Production (S Reclamation Recomplete Temporarily A Water Disposa	Well Integrity Other

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 recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertunent 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 recompletion 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.)

Returned well to production on August 11, 2008.

RCVD AUG 20'08 OIL CONS. DIV. DIST. 3

14. I hereby certify that the foregoing is true and correct Name (P*inted/Typed)			Protein and a second a second and a second and a second and a second and a second a			
Mike Allen	Title	Operation Manager				
Signature Son C	Date	8-14-08				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
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Approved by		Title	Date			
Conditions of approval, if any, are attached. Approval of this notice does not warrancertify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon.	Office	norden end geanen				
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any States any false, fictitious or fraudulent statements or representations as to anymatte	person r within	knowingly and willfully to make its jurisdiction				

(Instructions on page 2)

