## (August 2007)

When Justified By The Operator. Provide Justification

For Your Requested Shut-In.

New Mexico Oil Conservation Division, District I

1625	N.	French	DIMMENO	1004-0137
** *	•	8 778 # O	ra da Da de Legar. Il	Jul 21 2010

UNITED STATES	1625 N. French Drive No. 1004-013
DEPARTMENT OF THE INTERIOR	Hobs, NM 8822 mures: July 31, 20
LIDEALLOE LAND MANAGEMENT	5 Lease Serial No

Mad a z core	EAU OF LAND MANA			MNM36653	
SUNDRY N  RECEPTED FOR USE this to abandoned well.	IOTICES AND REPORT Form for proposals to	6 If Indian, Allottee o	r Tribe Name		
abandoned well.	Use Form 3160-3 (AP	PD) for such proposal	s.		
	T IN TRIPLICATE – Other In		7. If Unit of CA/Agreement, Name and/or No. NMNM72387		
Type of Well		8 Well Name and No.			
Oil Well Gas W	Vell Other		9. API Well No.	Carol Federal Com #13	
Name of Operator LRE Operating,			30-0	10. Field and Pool or Exploratory Area Pecos Slope; ABO West  11. Country or Parish, State Chaves, NM	
. Address 1111 Bagby Street Suite 4600,		b. Phone No. <i>(include area col</i> 575-623-8424	•		
Location of Well (Footage, Sec., T., 1980' FNL 16	R.,M., or Survey Description) 650' FEL G-01-07S-22E		<b>f</b>		
12 CHEC	CK THE APPROPRIATE BOX	(ES) TO INDICATE NATUR	E OF NOTICE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Start/Resume) Reclamation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	Other	
	Change Plans	Plug and Abandon	Temporarily Abandon		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		
٢	RECEIVED	1			
	SEP <b>05</b> 2012				
		DENIED! Well Produced For 78 Days From			
N	MOCD ARTESIA		hru 05-2012 And Was	Days Floili	
				Shut-In	
			II Has Not Produced F	or At Least	
		15 Days D	II Has Not Produced F Juring Any Month Sind	or At Least	
		15 Days D		or At Least	
		×		or At Least	
I hereby certify that the foregoing is     Name (Printed/Typed)		×	ouring Any Month Sind	or At Least	
4. I hereby certify that the foregoing is Name (Printed/Typed)  Michael Ba	arrett	Title Product	ouring Any Month Sind	or At Least	
4. I hereby certify that the foregoing is Name (Printed/Typed)  Michael Ba  Signature	THIS SPACE F	Title Product  Date 08/07/2	ouring Any Month Sind	AUG 2 1 2012	
Name (Printed/Typed)  Michael Ba  Signature  Printed/Syped)  Michael Ba  Signature  Printed/Syped)	THIS SPACE F	Title Product  Date 08/07/2	ouring Any Month Since ion Supervisor  012  TATE OFFICE USE  OLEUM ENGINEER	For At Least to e 03-2012!  AUG 2 1 2012	
4. I hereby certify that the foregoing is Name (Printed/Typed)  Michael Ba  Signature	THIS SPACE F	Date 08/07/2  FOR FEDERAL OR ST  PETF Title  of warrant or certify asse which would.	ouring Any Month Sind ion Supervisor  O12  TATE OFFICE USE  OLEUM ENGINEER  ROSWELL FLELD OFF	For At Least to e 03-2012!  AUG 2 1 2012	

its jurisdiction