## N.M. Oil Cons. DIV-Diut. 2 1301 W. Grand Avenue

Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007

6. If Indian, Allottee or Tribe Name

## 5. Lease Serial No. LC-029548-A

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.

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SUBMIT IN TRIPLICATE- Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well Oil Well	Gas Well Other		NOV 2 3 2005	8. Well Name and No.	
2. Name of Operator Merit Energy Company		Jul-ah i esia		C. A. Russell Well No. 6  9. API Well No.	
3a Address		3b. Phone No. (include area code)		30-015-05219	
13727 Noel Road, Suite 500, Dallas, Texas 75240		972-628-1610		10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec.,		11. County or Parish, State		ne Basish Stata	
990' FNL & 1384' FWL, Sec.				ounty, New Mexico	
12. CHECK AI	PPROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, R	EPORT, OR	OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
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 Abando Plug Back			Water Shut-Off  ✓ Well Integrity  Other
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.)  11/10/2005 - Dug out around wellhead to expose surface casing. Examined well for problems and found none. Conducted NMOCD MIT Test. Well Tested O.K. Original chart to NMOCD with Field Inspector, copy attached.					
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14. I hereby certify that the foreg Name (Printed/Typed)	oing is true and correct	1			
Larry M. Sanders	3	Title	Sr. Regulatory Analyst		
Signature Luci Mande		Date	Date 11/16/2005		
ACCEPTED FHIS REAGEROR FEDERAL OR STATE OFFICE USE					
Approved by SGD.)	DAVID R. CLAS		Title	Da	te
Conditions of approval, if any are attached. Approval of this notice does not warrant or certify that the applicant holds legal of equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			Office		
Title 18 U.S.C. Section 1001 and Title. States any false, fictitious or fraudule	13 U.S.C. Section 1212, make it a contraction of representations as	rime for any person to any matter within	knowingly and willfully to its jurisdiction.	make to any	department or agency of the United

(Instructions on page 2)

