Form 3160-5 (September 2001)

N.M. Oil Cons. Dly-Dist. 20RM APPROVED OMB No. 1004-0135 Approved Approved OMB No. 1004-0135 UNITED STATES

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DEPARTMENT OF THE INTERIOR 1301	1 5 G 25 T		Language La Francisco Language
	1.51 A		[1 1 2 3 7 19 16 Expires. January .
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RUREAU (IF LAND) MANAUTEMENT ••••	,		

SUNDRY NOTICES AND REPORTS ON WELASTESIA, NIM 8

abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
SUBMITINTR	IPLICATE: Other instru	tions on rever	se side	7. If Unit or CA	A/Agreement, Name and/or No.		
I. Type of Well		A STATE OF THE PERSON NAMED IN COLUMN TWO		35101			
Oil Well Gas Well Other					8. Well Name and No.		
2. Name of Operator					Lazarus Federal #1		
NADEL AND GUSSMAN PERMIAN, LLC					9. API Well No.		
3a. Address 3b. Phone No. (include			•	30-005-63780	30-005-63780		
601 N. MARIENFELD MIDLAND, TX 70701 Suite 508 (432) 682-4		(432) 682-4429	RECEIVED	10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T, R., M., or Survey Description) Sec. 25 - T15S - R27E, 1,980' FSL & 660' FWL			DEC 2 8 2005		Buffalo Valley Penn.		
				11. County or F	11. County or Parish, State		
			OOD:ARTERIA	Chaves, New	Mexico		
12. CHECK API	PROPRIATE BOX(ES) TO	INDICATE NAT	URE OF NOTICE, F	EPORT, OR O	THER DATA		
TYPE OF SUBMISSION	·		TYPE OF ACTION				
	Acidize	Deepen	Production (Sta	rt/Resume)	Water Shut-Off		
Notice of Intent	☐ Alter Casing	Fracture Treat	Reclamation		Well Integrity		
Subsequent Report	Casing Repair	New Construction	n Recomplete	∀	Other Inter. Casing		
_	Change Plans	Plug and Abandon	n 🔲 Temporarily A	oandon			
Final Abandonment Notice	Convert to Injection	Plug Back	■ Water Disposal				
12/08/05 RU csg crew, run 43 joi pump lead 300 sx 35/65 poz and 3K X 11" 3K B section. Test to 12/09/05 Test BOP Blinds / Ram PU BHA / TIH. Test casing to 1	200 sx tail class C, displace wit 1250 psi. At report time, NU Bos / Manifold to 3,000 psi high a	h 108.5 bbls FW, bu OP's. WOC 18 hrs. and 250 low test annu	ump plug at 1160 psi, ci ular 1,500 psi high and lling formation @ 2:00a	rc +/- 169 sx to p 250 psi low. Inst	all wear bushing strap BHA /		
14. I hereby certify that the foregoir Name (PrintedlTyped)	ng is true and correct						
JOSH FERNAU		Title	Title STAFF ENGINEER				
Signature M Tu-		Date	Date 12/12/05				
	THIS SPACE FO	A residence and a second second second second	STATE OFFICE US				
Approved by (Signature)	38.77		Name (Printed/Typed)	Ti	tle		
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	al or equitable title to those rights	does not warrant or in the subject lease	Office	•	Date		
Title 18 U.S.C. Section 1001 and Ti	itle 43 II S.C. Section 1212 make i	t a crime for any nero	on knowingly and willfull	v to make to any de	enartment or agency of the United		

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.