Form 3160₁ (June 2015)

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

NMOCD Artesia

FORM APPROVED OMB No. 1004-0137 Expires: January 31, 2018

SUNDRY NOTICES AND REPORTS ON WELLS

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an				6. If Indian, Allottee or Tribe Name		
abandoned well.	Use Form 3160-3 (A	PD) for such p	roposals.			
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well				8. Well Name and No. Dekalb #003		
Oil Well Gas Well Other 2 Name of Operator				Dekalb #003		
2. Name of Operator Larry Marker 3a. Address PO Pay 2189 3b. Phone No. (include area code)				9. API Well No. 30-005-00069		
3a. Address PO Box 3188 Roswell NM 88202	de area code)	10. Field and Pool or Exploratory Area 5980 BITTER LAKE; SAN ANDRES, SOUTH				
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) F-27-10S-25E				11. Country or Parish, State NM		
12. CHE	CK THE APPROPRIATE B	OX(ES) TO INDICA	TE NATURE OF NOT	ICE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION	,		TYPE OF AC	CTION		· .
Notice of Intent	Acidize Alter Casing	Deepen Hydraulic	=	duction (Start/Resume)	Water Shi	
Subsequent Report Casing Repair		New Const	=	complete Other		
Final Abandonment Notice	Change Plans Convert to Injection	Plug and A	=	rporarity Abandon ter Disposal		
taken at suff	ns. If the operation results in ices must be filed only after Acces Ac	pted for record. pted for record. pted for record. call the sum of the sum	mor recompletion in a uding reclamation, has 2 - / 8 NMOCD LICH direct Face, an Lich direct Ansu	we been completed and the Natural Review (N, E, M, E	source Sp 5, w) feet.	ed anti-sesting has been etermined that the site ecialist Control
Will contact CU BLM with info.	E Power Co.	upany by	July B.	1 st 2018.	nd Prov	rde
Well information o	n DHM by	July 15	+ 2018.	Contact BL	M whe	n complete
14. I hereby certify that the foregoing is	true and correct. Name (Pri	nted/Typed)				
LARO	CY MODKE	Title	e Pe Rast	51	20 BUR	
Signature LiM	1	Date	6-15	-18	ROSE ROSE	Ä A
	THE SPACE	FOR FEDERA	L OR STATE OF	*H.F.USE	- S	fr
Approved by Rel II	7		Title NRS	1	TE U	< m
Conditions of approval, if any, are attact certify that the applicant holds legal or e which would entitle the applicant to con-	quitable title to those rights		Office RFO		21	