

Notice of Intent

X Subsequent Report

Final Abandonment Notice

## UNITEDSTATES

## DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| SHINDRY | NOTICES | AND | REPORTS | ON | WFI | 19 |
|---------|---------|-----|---------|----|-----|----|

| FORMAPPRO<br>OM B No. 10<br>Expires: Ma |           |
|---|-----------|
| ease Serial No.                         | rear rear |
| INM 103571                              | OCD 2007  |

| 5. Lease Serial No.          | 44.5 - J <b>34.7</b> |
|------------------------------|----------------------|
| NMNM 103571                  | OCD -Apr 2007        |
| 6 If Indian Allottee or Trib | e Name               |

Well Integrity

Other

|  | ell. Use Form 3160 - 3 (APD) for such proposals. | V. 12 1111111111111111111111111111111111              |  |
|--|--|---|--|
| SUBMIT IN TR   | PLICATE - Other instructions on reverse side.    | 7. If Unit or CA/Agreement, Name and/or No.           |  |
| 1. Type of Well OilWell  | ☑ GasWell ☐ Other                                | 8. Well Name and No.                                  |  |
| 2. NameofOperator<br>Latigo Petroleum, Inc.  |  | Highlands "25" Federal #1  9. API Well No.            |  |
| 3a. Address       3b. Phone No. (include area code)         P.O. Box 10340 Midland TX 79702-7340       (432)685-8229 |  | 30-015-31944  10. Field and Pool, or Exploratory Area |  |
| 4. Location of Well (Footage, Se   | c., T., R., M., or Survey Description)           | Bunting Ranch - Atoka                                 |  |
| 1900' FNL & 1980' FEL<br>(G) Sec. 25, T19S, R21E   | :  | 11. County or Parish, State Eddy NM                   |  |
| 12. CHECK A  | PPROPRIATE BOX(ES)TO INDICATE NATURE OF NOTICE   | , REPORT, OR OTHER DATA                               |  |
| TYPE OF SUBMISSION   | TYPE OF ACTION                                   |   |  |
|  | Acidize Deepen Production                        | (Start/Resume) Water Shut-Off                         |  |

Reclamation

\_\_ Recomplete

WaterDisposal

X Temporarily Abandon

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 pertinent 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.)

FractureTreat

PlugBack

New Construction

Plug and Abandon

Latigo Petroleum, Inc. respectfully request TA status.

AlterCasing

Casing Repair

Convert to Injection

\_ Change Plans

3/16/07 - MI&RU. Set 500 bbl frac tank and pipe racks. Pumped 45 bbls. 2 % KCL wtr down tbg. ND 7 1/16" 5M tree and NU 6" 1500 Hydraulic BOP. Released pkr. TOH w/ 227 jts. 2 7/8" J55 tbg., SN, and 5 1/2" Model "R" Dbl Grip pkr. TIH w/ 5 1/2" CIBP, SN, and 227 jts. 2 7/8" tbg. Set CIBP @ 7279'. Note: Atoka perfs. f/ 7330' - 7478' covered and TA'd.

3/19/07 - Broke circ and displaced wellbore w/190 BFW + corrosion inhibitor mixed. Pressure tested casing to 810#. Held. TOH LD w/ 227 jts. 2 7/8" J55 tbg., SN, and setting tool. ND 6" 1500 Hydraulic BOP and NU 6" 900 x 2 3/8" 8rd B-1 tbg. hanger. Loaded, pressured casing to 560#, and charted 30 min. test. Held. RDMO. Cleaned location. Well TA'd. Will notify OCD and run MIT for TA'd well status. Ran good MIT. Pressured csg to 580# and charted 30 min. Test witnessed by Richard Inge w/OCD and Cheryl de Montigny w/BLM. Original chart was retained by NM OCD. Copy of chart is attached.

| 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)  Lisa Hunt   | Title | Regulatory Analyst    |      |  |  |
|---|-------|-----------------------|------|--|--|
| Liou Hain   |       | regulatory / triaryst |      |  |  |
| Signature Lisa Hunt   | Date  | ate 04/11/2007        |      |  |  |
| THIS SPACE FOR FEDERAL OR STATE OFFICE USE  |       |                       |      |  |  |
| Approved by   |       | Title                 | Date |  |  |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or 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 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United   |       |                       |      |  |  |

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

Month - Year OCD - ARTESIA, NM

