OCD-ARTESIA



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| | UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT | | FORM APPROVED ON B No 1004-0137 Exputs: March 31, 2007 | |
| 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. SUBMIT IN TRIPLICATE- Other instructions on reverse side. 1. Type of Well Gas Well Other | | | 1 Lease Scrid No., NR 220832 HW 113387 | |
| | | | 6. If Indian, Allottee or Tribe Name N/A | |
| | | | 7. If Unit or CA/Agreement, Name and/or No. | |
| | | | N/A Nm 114425 | |
| 2. Name of Operator Presten Exploration, LLC | | | Frontier 9 Federal Com #1 | |
| | | No. (include area code) | 30 013 3920 | |
| 4. Location of Well (Fogsage, Sec., T., R., M., or Survey Description) | | ~7471 | 10. Field and Pool, or Explormory Area Big Freddy Morrow | |
| 1980 [°] FSL & 1980 [°] FEL | | | 11 County or Parish, State Sec 9, T-238, R-22E | |
| 12. CHECK A | PPROPRIATE BOX(ES) TO INDICATE | NATURE OF NOT | CE, REPORT, OR OTHER DATA | |
| TYPE OF SUBMISSION | | TYPE OF ACT | ON | |
| Notice of Intent | Acidize Deepen Alter Casing Fracture | | | |
| Subsequent Report | , parting | Abandon Recom | oleke Other Change of Operator | |
| Final Abandonment Notice | Convert to Injection Plug Bac | lun-md | Disposal | |
| Attach the Bond under which following completion of the it testing has been completed. F determined that the site is read From: Preston Explorate P.O. Box 7526 The Woodlands, | the work will be performed or provide the Bond Navolved operations. If the operation results in a nursual Abandomment Notices shall be filed only after by for final inspection.) Ion Texas 77387 L.P Operator Number #243452 Orive, Suite 120 | Vo. on file with BLM/BIA ultiple completion or recor r all requirements, includiu | ad and true vertical depths of all pertinent markers and zones. Required subsequent reports shall be filed within 30 days appletion in a new interval, a Form 31604 shall be filed once by reclamation, have been completed, and the operator has a comparative. APPROVED OCT 2.5 2005 | |
| Dearwe 5 | CORKRAN R | ond # NM | LINDA DENNISTON BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE | |
| 14. Thereby certify that the for | | one + Nin | 500045 | |
| Name (Printed/Typed) Timothy R. Deve | r | Title Operati | ons Manager | |
| Signature Trains | All | Date 09/22/2006 | | |
| | THIS SPACE FOR FEDERA | L OR STATE OF | FICE USE | |
| Approved by | | Title | Date | |
| Conditions of approval, if any, are | e attached. Approval of this notice does not wan tal or equitable title to those rights in the subject to conduct operations thereon. | rant or | | |
| Title 18 U.S.C. Sertice 1001 and Ti States any false. Retitious or fraud | ide 43 U.S.C. Section [2], make it a crime for an indent statements of representations as to any mat | ry person knowingly and ter within its jurisdiction. | willfully to make to any department or agency of the United | |

(Instructions on page 2)

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