



# N.M. Oil Cons. DIV-Dist. 2

Form 3160-5  
(February 2005)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

1301 W. Grand Avenue  
Artesia, NM 88210

FORM APPROVED  
OMB No 1004-0137  
Expires 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.**

5. Lease Serial No.	LC069280-C
6. If Indian, Allottee or Tribe Name	

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit of CA/Agreement, Name and/or No. SULIMAR QUEEN UNIT
2. Name of Operator NEW MEXICO INSTITUTE OF MINING & TECHNOLOGY		8. Well Name and No. Sulimar Queen Unit TR 3 # 2
3a. Address D Cox, SNL MS 0778, Box 5800, Albuquerque, NM 87185-0778	3b. Phone No. (include area code) (505) 284-3871	9. API Well No. 30-005-60064
4. Location of Well (Footage, Sec., T, R, M., or Survey Description) 1650 FNL 1980 FEL U/L G SEC 24 T15S R29E		10. Field and Pool or Exploratory Area SULIMAR QUEEN
		11. Country or Parish, State CHAVES COUNTY, NEW MEXICO

DEC 26 2007  
ARTESIA

### 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recomplate 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

SURFACE REMEDIATION COMPLETED

ACCEPTED FOR RECORD

JAN 02 2008

Gerry Guye, Deputy Field Inspector  
NMOCD-District II ARTESIA

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Jack B. Tillman	Title SNL Field Representative
Signature	Date 10/24/2007

### THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>/s/ Angel Mayes</i>	Assistant Field Manager, Lands And Minerals	Date DEC 17 2007
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 ROSWELL FIELD 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.

(Instructions on page 2)