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OCD-ARTESIA

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Form 3160-5
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

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.
NM 354232
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
VERNON E. FAULCONER, INC.

3a. Address
P.O. BOX 7995, TYLER TX 75711

3b. Phone No. (include area code)
903-581-4382

7. If Unit of CA/Agreement, Name and/or No.
NMNM 100728

8. Well Name and No.
RGD #1

9. API Well No.
30-015-30175

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
A - SEC. 19, T21S-R27E

10. Field and Pool or Exploratory Area
BURTON FLAT/MORROW

11. Country or Parish, State
EDDY, NM

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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other TRANSFER OF OPERATIONS
	<input type="checkbox"/> Change Plans	<input 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 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 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.)

TRANSFER OF OPERATIONS EFFECTIVE 12/01/08, PREVIOUS OPERATOR KCS RESOURCES, INC.

VERNON E. FAULCONER, INC. HEREBY CERTIFIES THAT IT IS AUTHORIZED BY THE PROPER LEASE INTEREST OWNERS TO CONDUCT LEASE OPERATIONS AND IS RESPONSIBLE UNDER THE TERMS AND CONDITIONS OF THE LEASE ASSOCIATED WITH THIS WELL.

BOND COVERAGE PURSUANT TO 43CFR3104 FOR LEASE ACTIVITIES BEING PROVIDED BY VERNON E. FAULCONER, INC. STATEWIDE BOND NM2516.

REPRESENTATIVE FROM SELLER'S ORGANIZATION (KCS RESOURCES, INC.):

SIGNATURE

Stephen W Herod

PRINTED NAME:

TITLE: Executive Vice President - Corporate Development

DATE: 12/23/08

ACCEPTED FOR RECORD

NO - C-145

JAN 21 2009

Gerry Guye, Deputy Field Inspector
NMOC-District II ARTESIA

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

JEAN CRAWLEY

Title VICE PRESIDENT

Signature

Date

1-6-09

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Office

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.

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)

