Form 3160-5 (February 2005)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVEDOMB NO. 1004-0137
Expires March 31, 200

am

SUNDRY NOTICES AND REPORTS ON WELLS

'	Expires March 51	, 2007	1 1	٠
5. L	ease Serial No	.,,	: 7.	
640)5 .		. 1	
If	Indian, Allottee or Trib	e Nan	ne	

Do not use this form for proposals to drill or to re abandoned well. Use Form 3160-3 (APD) for such	If Indian, Allottee or Tribe Name					
SUBMIT IN TRIPLICATE - Other instructions on re-	If Unit or CA/Agreement, Name and/or No					
1. Type of Well X Oil Well Gas Well Other 2. Name of Operator KCS RESOURCES, LLC	8 Well Name and No. WEST SHUCART 19' 8 FEDERAL					
3a. Address 3b. Ph	one No (include area code)	API Well No. 0-015-30923				
1000 LOUISIANA, SUITE 5600, HOUSTON TEXAS 77002 4 Location of Well (Footage, Sec., T., R, M, or Survey Description) 660 FNL & 2310 FEL CONCRESS SECTION SEC 19-18S-31E	10. Field and Pool, or Exploratory Area SHUCART; BONE SPRING, NORTH					
		1. County or Parish, State DDY NM				
12. CHECK APPROPRIATE BOX(ES) TO INDICATE		RT, OR OTHER DATA				
TYPE OF SUBMISSION	TYPE OF ACTION					
X Notice of Intent Acidize Alter Casing Casing Repair Change Plans Convert to Injection	Deepen Production (Some Fracture Treat Reclamation New Construction Recomplete Plug and Abandon Temporarily Articles Water Dispose	Well Integrity x Other CHANCE OF OPERATOR				
If the proposal is to deepen directionally or recomplete horizontally, give subsurface Attach the Bond under which the work will be performed or provide the Bond No following completion of the involved operations. If the operation results in a multi testing has been completed. Final Abandonment Notices shall be filed only after a determined that the final site is ready for final inspection.) EFFECTIVE JANUARY 1, 2009 THE OPERATOR OF THIS WELL CHRESOURCES, LIC. Be advised that KCS RESOURCES, LLC is considered to be	on file with BLM/BIA. Required sub- ple completion or recompletion in a new all requirements, including reclamation, ANGED ITS NAME FROM KCS RE	sequent reports shall be filed within 30 days interval, a Form 3160-4 shall be filed once have been completed, and the operator has ESOURCES, INC. TO KCS				
responsible under the terms and conditions of the leas or portions thereof.	-	ucted on the leased lands				
Bond Coverage for this well is provided under HIM Bond	APPROV	FEB 257 MHD-21 SIMUL PROPH				
14. I hereby certify that the foregoing is true and correct Name (Printed Typed) CORINGE JULICH	CAPI OF LAND MANASTA	AGOUT.				
Signature (Duis D	ate FEBRUARY 7, 2009	ZNI CONTRACTOR OF THE CONTRACT				
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 of certify that the applicant holds legal or equitable title to those rights in the subject least 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, makes it a crime for any States any false, fictitious or fraudulent statements or representations as to any matter with		to any department or agency of the United				