Form 3160-5 (April 2004)

Approved by

N.M. Oil Cons. DIV-Dist. 2 UNITED STATES

DEPARTMENT OF THE INTERIOR 301 W. Grand Avenue

FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007

Date

ROSWELL FIELD OFFICE

BUREAU OF LAND MANAGEMENT A HOGIC NIM 8821

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.					NM NM 11	Allottee or Tribe Name DEC 1 6 2009	
SUBMIT IN TRIPLICATE - Other instructions on reverse side					7 If Unit o	MACO WATES	
1. Type of Well Oil Well X Gas Well Other 2. Name of Operator PARALLEL PETROLEUM CORPORATION 3a. Address P.O. BOX 10587 MIDLAND, TX 79702 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL 1880' FSL AND 190' FWL Sec. 16, T-15S-R25E BHL 1880' FSL AND 660' FWL Sec. 17, T-15S-R25E			. Phone No. (<i>include area code</i>) 432–688–3658			8. Well Name and No. ALL ALONG 1525-17 FED COM #1 H 9. API Well No. 30-005-63925 10. Field and Pool, or Exploratory Area WOLFCAMP GAS 11. County or Parish, State	
12. CHECK APPROPRIATE	BOX(ES) TO IND	DICATE NAT	URE OF N	OTICE, R	CHAVEZ EPORT, OR (NM OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
Notice of Intent	Acidize	Deepen		\equiv	ection (Start/Resume		
X Subsequent Report	Alter Casing Casing Repair	Fracture New Co	onstruction	Reco	mation mplete	Well Integrity Other	
Final Abandonment Notice	Change Plans Convert to Injects		d Abandon ack	\equiv	orarily Abandon Disposal		
Describe Proposed or Completed Operation (clearly If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be per following completion of the involved operations. I testing has been completed. Final Abandonment determined that the final site is ready for final inspections. This well is a CAS PRODUCER AND I conducted in the spring of 20 this sundry is accepted and a regarding interim reclamation addressed at that time.	nation will be 10. Until then ny further issu	ubsurface locatic Bond No. on file n a multiple com ly after all requ ICN WORK H2	ons and measure with BLM/E miletion or recirements, includes BEEN CO	EPTED	FOR RECO	of all pertinent markers and zones eports shall be filed within 30 day a Form 3160-4 shall be filed once in completed, and the operator had a completed.	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)		Title					
KAYTE MC CORMICK	~ // .	Date	SR PROD	0 & REG 0	TECH		
	S SPACE FOR FEI	DERAL OR S			· · · · · · · · · · · · · · · ·		

Title

Office