Form 3160-5 (April 2004)

## UNITED STATES N.M. Oil Cons. DIV-Dist. 2 DEPARTMENT OF THE INTERIOR 301 W. Grand Avenue BUREAU OF LAND MANAGEMENT Artesia, NM 88210. Lease SUNDRY NOTICES AND REPORTS ON WELLS

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

<b>1</b> D.	Lease	Serial	No.
Υ			

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on rever RECEIVED					7. If Unit or CA/Agreement, Name and/or No	
Type of Well     Oil Well	DEC 16 2009		8. Well Name and No. SILVER CHARM 1 1525-17 FED COM			
2. Name of Operator	NMOCD ARTESIA					
PARALLEL PETROLEUM CORPORATION	21 DI			9. API Well No.		
3a. Address	Phone No. ( <i>include area code</i> ) <b>432–685–6563</b>		30-005-63932			
1004 N BIG SPRING, SUITE 400, MIDLA 4. Location of Well (Footage, Sec., T., R., M., or Survey I		432-665-6563		10. Field and Pool, or Exploratory Area WALNUT CREEK, WOLFCAMP		
SL: 760 FNL & 150 FEL SEC 17,		97631				
PP: 764 FNL & 746 FEL				11 County or Pa	rish, State	
BHL: 838 FNL & 1009 FWL	· · · · · · · · · · · · · · · · · · ·			CHAVES	NM	
	BOX(ES) TO INDICATI			ORT, OR OTHE	R DATA	
TYPE OF SUBMISSION		TYP	E OF ACTION			
Notice of Intent	Acidize	Deepen Production		on (Start/Resume) Water Shut-Off		
Find a service	Alter Casing	Fracture Treat X Reclamate		ion Well Integrity		
X Subsequent Report	Casing Repair	New Construction Recompl		ete Other		
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporani	ly Abandon		
	Convert to Injection	Plug Back Water Di		posal		
Inspections for Interim Reclam conducted in the spring of 2010 this sundry is accepted and an regarding interim reclamation was addressed at that time.	INTERIM RECLAMATION W ation will be O Until then	e de la company	EPTED FO	DEC 1 5 2	009 UMayes	
14. I hereby certify that the foregoing is true and correct		Title				
Name (Printed/Typed)  KAYE MC CORMICK		SR PROD & REG TECH				
House McCon mie	K	Date 12-04-20	009			
	S SPACE FOR FEDERAL	OR STATE OF	ICE USE			
Approved by		Title		Date		
Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to	o those rights in the subject lea	or Office ROS	SWELL FIEL	D OFFICE		