Form 3160-5 (September 2001)

## OPERATOR'S COPY UNITE **TATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

	OMB No. 1004-0135 Expires. January 31, 200
5. Lease S	Serial No.

6. If Indian, Allottee or Tribe Name

NMNM-100335

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.

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FORM APPROVED	•
OMB No. 1004-0135	
Expires. January 31, 2004	
se Serial No.	

SUBMIT IN TR	IPLICATE = Other Institut	ห์กับเองกาศพรรร	side .	7. If Unit or C	CA/Agreement, Name and/or No	
Oil Well Gas Well Other					8. Well Name and No.	
2. Name of Operator				Ogden #1H		
BTA Oil Producers LLC				<del>-  </del>	9. API Well No.	
3a. Address		3b. Phone No. (include area code)			30-015-24206  10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec.,		(432) 682-3753		1	Culebra Bluff; Bone Spring, S	
UL -G-, Sec. 29, T23S-R28E 1980' FNL & 1830' FEL	t, M., M., or Survey Description)			11. County or	Parish, State	
12 CUECK AD	DDODDIATE DOV(FG) TO	DIDIOATENIATI	DE OF NOTICE I	Eddy Co		
	PROPRIATE BOX(ES) TO			CEPORT, OR	OTHER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION			
Notice of Intent	= =	Deepen	Production (Sta	rt/Resume)	Water Shut-Off	
Notice of filterit	Alter Casing	☐ Fracture Treat	Reclamation	l	Well Integrity	
Subsequent Report	Casing Repair Change Plans	New Construction	Recomplete  Temporarily A		Other Drilling in ST hole	
Final Abandonment Notice	Convert to Injection	Plug and Abandon Plug Back	Water Disposal			
testing has been completed. Fin determined that the site is ready  10/10-27/2009	olved operations If the operation real Abandonment Notices shall be for final inspection)  Install & test BOP's. Run gyro 15-6626' Drilling 6-1/8" hole.	esults in a multiple com filed only after all requi	pletion or recompletion rements, including recl	Set whipstock.  ACCEPTE  NOV /s/ C	D FOR RECORD  1 0 2009  Chris Walls	
Name (Printed Typed)	g is true and correct	1	L	CARLSB	AD FIELD OFFICE	
Pam Inskeep		Title	Regulatory Adminis	trator		
Signature /////	1286D	Date	10/28/2009			
	THIS SPACE FO	OR FEDERAL OR S	STATE OFFICE US	SE		
Approved by (Signature)		1	Name Printed Typed)		Title	
Conditions of approval, if any, are certify that the applicant holds leg, which would entitle the applicant to	attached Approval of this notice il or equitable title to those rights conduct operations thereon	does not warrant of f	Office		D ate	
Title 18 U.S.C. Section 1001 and Ti States any false, fictitious or fraudule	tle 43 U S C Section 1212 make i ent statements or representations as	t a crime for any persor to any matter within its	knowingly and willful jurisdiction	ly to make to any	department or agency of the United	