

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

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.
NMNM04393

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

CFM OIL COMPANY, LOUIS FULTON

3a. Address

PO BOX 1176
ARTESIA NM 88211

3b. Phone No. (include area code)

575-746-3099 746-4787

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

NESW 31 16S 30E NMP

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

8. Well Name and No.
DEKALB #A

9. API Well No.

10. Field and Pool or Exploratory Area

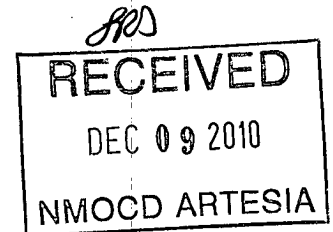
11. Country or Parish, State
EDDY COUNTY NEW MEXICO

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 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
	<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 recompleat 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 recompleat 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.)

REQUESTING APPROVAL FOR OFF LEASE MEASUREMENT



Missing Required INFO. SEE ATTACHED

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

LOUIS FULTON

Title OWNER

Signature

Date 04/30/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

DENIED

/s/ JD Whitlock Jr

Title LPE7

Date

12/7/10

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.

Office

CFO

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)

DW

**Bureau of Land Management
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972**

Guidelines for Off-Lease Measurement and Storage.

The following information must be included with any application to store, measure or sale production off-lease:

1. A formal request (Sundry Notice Form 3160-5) for approval to store, measure or sale production off-lease with an appropriate explanation and diagram(s) describing the proposed operation in detail.
2. A map showing the lease numbers and location of all leases and wells that will be sending production off-lease and all measurement points, and/or storage facility. All lease numbers, unitized or communitized areas.
3. Any wells or leases proposed to be added to an approved off-lease storage and or measurement facility must be approved by the Authorized Officer prior to their being included in the facility.
4. A schematic diagram which clearly identifies and places all equipment that will be utilized.
5. Include gas sales meter location and station name or number.