Form 3160-5 (August 2007)

N.M. Oil Cons. DIV-Dist, 2

GOITHANT GRAND AVENUE DEPARTMENT OF THE INTERIOR BUREAU OF LANGUAR MENSE 210

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

5. Lease Serial No. NMNM05876

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.					6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well							
✓ Oil Well Gas Well Other				8. Well Name and No. Dekalb #1			
2. Name of Operator JAM Oil LLC			9. API Well No. 300005 (00067				
3a. Address PO Box 13382 Artesia, NM 88211		3b. Phone No. 5753656266	(include area co	de)	10. Field and Pool or E	xploratory Area	
4. Location of Well (Footage, Sec., T.,1 27 10S 25E	R.,M., or Survey Description	7)			11. Country or Parish, Chaves, NM	State	
12. CHEC	K THE APPROPRIATE BO	OX(ES) TO IND	ICATE NATUR	E OF NOTIO	CE, REPORT OR OTHE	ER DATA	
TYPE OF SUBMISSION TYPE O					OF ACTION		
Notice of Intent	Acidize Alter Casing Casing Repair	=	en ure Treat Construction	Recl	uction (Start/Resume)	Water Shut-Off Well Integrity ✓ Other Cleaned	lup a spill
✓ Subsequent Report	= : =		and Abandon	Recomplete Temporarily Abandon		Other	
Final Abandonment Notice	Convert to Injection	Plug	Back	☐ Wate	r Disposal		
The morning of Dec. 15th, an agent of the BLM found that the Dekalb #1's stuffing box was leaking oil. I received a phone call. When I arrived, I is gallons of oil on the ground around the stuffing box. I repaired the stuffing box and picked up the oil soaked dirt and disposed of it properly. It completely done within about three hours of the notification. Accepted For Record Only! Approval Subject To Stuffing Box Being Satisfactorily Repaired, Oil Soaked Dirt Being Picked Up And Disposed Of, And Location Being Cleaned Up According To BLM Specifications! Additional Royalty May Be Required Per NTL-4A If It Is Determined That This Production Was Avoidably Lost!							
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Amanda Johnson							
A			Title Presider	nt	THE		
Signature Amada	Johns	Л	Date 12/26/20	010			
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by ACCEPTED FOR					T I		
Conditions of approval, it any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal/on/equitable 2014 to those rights in the subject lease which would entitle the applicant to conduct operations thereon.							
Title 18 U.S.C. Section 1001 and Title 43 t fictitious or fraudulent statements of repre-	entations as to any matter wi	a crime for any per thin its jurisdiction	rson knowingly a	nd willfully to	make to any department	or agency of the United	tates any false
(Instructions on page 23 TRULEUM EA	NOINEER					***	