Form	31	60-5
(Augu	ıst	1999)

Signature

Approved by

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.

		·**			N.1	M. Oil	ηs. I	Divisio	ORM APPROVED	CIS
Form 3160-5 (August 1999)	DE B	UNITED S EPARTMENT OF UREAU OF LAND NOTICES AND	STATES THE INT MANAGE	ERIOR MENT	21281 Art	J _a S. 1st esia, NI	Stree M 882	et Expire	vib No. 1004-0133 es November 30, 2000	• (`
	SUNDRY	NOTICES AND	REPORT	S ON WE	LLS 🧗	2		NM-671	02	
Do aba	not use this andoned well.	form for propo Use Form 3160	sals to dri -3 (APD) fo	II or to re- or sech pro 	enter an oposais.	28293			lottee or Tribe Nam	ie
SUB	MIT IN TRIP	PLICATE - Other	r instructi	ons on re	verse sig				A/Agreement, Name	
1. Type of Well	r-td	11-4	T	. "40	/ _	ر در ای			Delaware	Unit
Oil Well		Other Water	Injector	<u>^</u>	168795	<u>v</u>		Well Name : PDU #50		
2. Name of Operato St. Mary 1		loration	c/o Nai	nce Petr	oleum C	Corporati		API Well No		
3a. Address				b. Phone No				<u> 30-015-</u>	30030	
P. 0. Box		Billings, MT		(40	<u> 16)245-6</u>	248			ol, or Exploratory	Area
4. Location of Well		E., R., M., or Survey De FEL, Sec 35-) E					<u>Delaware</u>	
Unit Lette		LL, 3EC 33-	1193-12	7 ∟				11. County or Parish, State		
								Eddy, N	M	
12. (CHECK APPE	ROPRIATE BOX	(ES) TO IN	DICATE I	NATURE (OF NOTICE	, REPOR	RT, OR O	THER DATA	
TYPE OF SUBN	ISSION		-		TYPE C	OF ACTION				·
Notice of Intent		Acidize Alter Casing		Deepen Fracture Trea	_	Production (S		ne)	Water Shut-Off Well Integrity	
Subsequent Rep	ort	Casing Repair	u n	New Constru	=	Recomplete Temporarily	Abandan	u	Other	
Final Abandons	nent Notice	Change Plans Convert to Inject	tion 🔲	Plug and Aba Plug Back		Water Dispos				
Attach the Bond of following completesting has been of determined that the PDU #509 v 134 MBW ar stimulation	to deepen direction ander which the value of the involvement of the involvement of the involvement of the involvement of the value of the involvement of the involvem	onally or recomplete has work will be performed and operations. If the Abandonment Notice	orizontally, god or provide operation resuss shall be file ter injection and subs	ector in inject	Januar at its acid tr	d measured and BLM/BLA. Re for recompletints, including reference to the permitte reatments	d true vertical	cal depths of sequent rep winterval, a n, have been lative ssure l proven	fall pertinent mark orts shall be filed v Form 3160-4 shall completed, and the injection imit. The insufficiel	ers and zones. within 30 days I be filed once e operator has is initial nt to
25M gal. >	(L gel and	the existin 1 42M #'s 20 an to treat	/40 sand	d. This	operat recejvi SUBJF	ion is r ng regul CT TO	necessa latory	ary to and WI	waterflood	•
14. I hereby certify th Name (Printed/T)		s true and correct					BURE	4.	≈ 2000	$\neg \top$
•	b Thacker	`ay		Т	itle Op	<u>erations</u>	Engq:	ten RE	VD MANAGEME	\perp
				1					COUDED SAME	A I

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Title

Office

10/5/00

Date