Form 3160-5 (September 2001)

UNITED STATES N.M. Oil Cons. DIV-Dist. 2 FORM APPROVED DEPARTMENT OF THE INTERIOR 1301 W. Grand Avenue OMB NO. 1004-0135 Expires January 31, 2004

DELIECT	MIDINI OI	THE HALLIGOR
BUREAU	OF LAND	MANAGEMENT

BUREAU OF L	AND MANAGEMEN	Artoni	a, NM	222	S Lease Ser	rial No	
SUNDRY NOTICES	AND REPORTS O	N WELLS	CA TAKE	904	NM 93180	141 110.	
Do not use this form for μ abandoned well. Use Forn			1234		6. If Indian,	Allottee or T	ribe Name
SUBMIT IN TRIPLICATE - 0	Other instructions	on reverse side	A	00	7. If Unit or 34020	CA/Agreeme	ent, Name and/or l
Type of Well Oil Well		5262728	RECEIVE OCD - ART	`	Well Name Fed - Com 1	.625	#261
3a. Address	 1:	3b. Phone No. Encl	ude area code)	. 7/	API Well 1		
6 Desta Drive, Suite 6800 Midland, 1	1	432-682-8	553	all'	30 - 015 - 33		ploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey E SL: 660' FSL and 700' FEL, UL P, Se	Description)		6512026		Wildcat;	Wolfcamp	(Gas)
				- 1	Eddy Co.		NM
12. CHECK APPROPRIATE	BOX(ES) TO INDI-	CATE NATURE	OF NOTICI			THER DAT	
TYPE OF SUBMISSION			TYPE OF A				· · · · · · · · · · · · · · · · · · ·
Subsequent Report Final Abandonment Notice This horizontal well was permitted We would like to attempt an open he stimulation/completion.	ete horizontally, give sub formed or provide the Bo the operation results in a otices shall be filed only tion.) I with a 4-1/2" u	, including estimated surface locations and No. on file with a multiple completion after all requirement lincemented lin	starting date of measured and BLM/BIA. Ren or recomplet its, including rener being	Reclamation Recomplete Temporarily Water Dispos of any prop I true vertice equired sub ion in a ne- eclamation, run in	osed work an cal depths of sequent repo w interval, a l have been c	Other d approximal all pertinent rts shall be form 3160-4 ompleted, an	te duration thereo markers and zone illed within 30 day shall be filed one dd the operator ha
Liner will be run at a later date	if necessary.			JUN	ROVE 2 9 2004 BABYAK UM ENGIN		

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	Title					
Robin S. McCarley	Eng. Tech.					
Rolin S. M. Carley	Date 06/24/04					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by	Title	Date				
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject le which would entitle the applicant to conduct operations thereon.	t or Office					