Form 3160-5 (September 2001)

N.M. OH Cons. DAY-DISC 2

UNITED STATES DEPARTMENT OF THE INTERIOR 01 W. Grand Avenue

FORM APPROVED OMB NO. 1004-0135

BUREAU OF LAND MANAGEMEN A TOSIA, NIM 88210

SUNDRY	NOTICES	AND	REPORTS	ON	WELLS

Expires January 31, 2004

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 1 ribe Name		
SUBMIT IN TRIPLICATE -	reverse side RECEIVED		7. If Unit or CA/Agreement, Name and/or No 34020				
1. Type of Well Oil Well X Gas Well Other	JUL 2 9 2004		8. Well Name an Fed-Com 162				
2. Name of Operator Perenco LLC		ACD.	MHI ESIA				
3a. Address	38	. Phone No. (include are	a code)	 API Well No. 30-015-3343 	.		
6 Desta Drive, Suite 6800 Midland,	432-682-8553		10. Field and Pool, or Exploratory Area				
4. Location of Well (Footage, Sec., T., R., M., or Survey	Description)			Wildcat; Wo	lfcamp (Gas)		
SL: 660' FSL and 700' FEL, UL P, S	Sec 26, T16S, R25E			11 County on P	omials State		
			ļ	11. County or P Eddy Co.	arish, State NM		
12. CHECK APPROPRIATE	BOX(ES) TO INDIC	ATE NATURE OF N	IOTICE, REPO				
TYPE OF SUBMISSION		TYPE OF ACTION					
Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off		
<u> </u>	Alter Casing	Fracture Treat	Reclamation		Well Integrity		
X Subsequent Report	Casing Repair	New Construction	Recomplete	, <u> </u>	Other Acidize well		
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporarily	_			
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disp	osal			
7/15/04 Acidized horizontal lateral throu Average treat rate: 2.2 bpm A Pulled coil tubing up to 1500'and Jet well dry. Increased nitroger ISIP: 1610 psi 5 min: 1560 psi 10 min: 1540 psi 15 min: 1510 psi	Average pressure: d pumped nitrogen an rate to 800 scf/m	4565 psi it 400 scf/min.	TIH to 5400 dry.	e puntilly JUL ZI III E	RECEIVED		
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Lisa Hunt Lisa Hunt		Title Regulat Date 79/04	AN Tech	CM - C	<u></u>		
THIS	S SPACE FOR FEDER	AL OR STATE OFF	ICE USE				
Approved by		Title		Date			
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to	f this notice does not warra those rights in the subject	nt or Office			······································		