

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

1301 W. Grand Avenue

Artesia, NM 88210

Form 3160-5  
(April 2004)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

## 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.

SUBMIT IN TRIPLICATE- Other instructions on reverse side  
RECEIVED1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator BETTIS, BOYLE &amp; STOVALL

3a. Address  
P.O. BOX 1240, GRAHAM, TX 764503b. Phone No. (include area code)  
940-549-0780

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

2080' FNL & 660' FEL SEC. 21-~~SS48~~-R29E  
T21S

5. Lease Serial No.

NM-03205

6. If Indian, Allottee or Tribe Name

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

89100326Q

8. Well Name and No.

Big Eddy Unit No. 114

9. API Well No.

300152626300S1

10. Field and Pool, or Exploratory Area

QUAHADA RIDGE ATOKA

11. County or Parish, State

EDDY CO., NM

## 12. CHECK 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 checked="" 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 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 checked="" 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 recomplete 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed and the well has

8-25-04 MIRU PULLING UNIT. SITP/SICP 0+ PSIG

8-26-04 PREP TO CHANGE FROM 5,000 TO 10,000 PSIG WELL HEAD. HEAD HAS BEEN CHANGED OUT.

8-27-04 PRESENT OPERATION: PREP TO REBUILD FLOWLINE.

8-29-04 FTP 2000 PSIG, 12/64" CHOKE, 1.6 MMCF/D

8-30-04 SOLD 1,342 MCF. 2700# WHP, 180# LP, 938 MCF CURRENT FLOW ON 9/64, OPEN CHOKE TO 10.5/64.

8-31-04 886 CUR FLOW RATE. 4500# WHP. 11/64" CHOKE. WELL FROZE UP AND WAS TURNED BACK ON @ 4:15PM.

9-01-04 756 MCF SOLD - DWN 1/2 DAY DUE TO FREEZING UP. 988 CUR FLOW RATE, 305# LP, 2200# WHP, 12/64" CK, 0 BW.

ACCEPTED FOR RECORD

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

KIM LIGON

Title REGULATORY ANALYST

Signature

Date

09/08/2004

SEP 15 2004

LES BABYAK

PETROLEUM ENGINEER

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

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.

Title

Date

Office

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)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OM B No. 1004-0137  
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**SUNDRY NOTICES AND REPORTS ON WELLS**

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**SUBMIT IN TRIPLICATE- Other instructions on reverse side**

1. Type of Well ☐ Oil Well ☒ Gas Well ☐ Other

SEP 17 2004

2. Name of Operator **BETTIS, BOYLE & STOVALL**

**OOD-ARTEZIA**

3a. Address  
**P.O. BOX 1240, GRAHAM, TX 76450**

3b. Phone No. (include area code)  
**940-549-0780**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**2080' FNL & 660' FEL SEC. 21-5S1S-R29E**

5. Lease Serial No.  
**NM-03205**

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7. If Unit or CA/Agreement, Name and/or No.  
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8. Well Name and No.  
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**9-02-04 1,200 MCF SOLD. 180# LP, 1450 TBG PRESS ON 12/64" CK.**  
**9-03-04 1100 MCF SOLD, 1300# TGB PRESS ON 12/64" CK**  
**9-04-04 1100 MCF SOLD, 1100# TBG PRESS ON 14/64" CK.**  
**9-05-04 1000 MCF SOLD, 1050# TBG PRESS ON 16/64" CK**  
**9-06-04 450 MCF SOLD, 2600# TBG PRESS HI-LO WAS SHUT-IN 10 HRS**  
**PRODUCTION. RETURNED WELL TO PRODUCTION ON 20/64" CK @ A RATE**  
**OF 1,100 MCFPD.**

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

**KIM LIGON**

Title **REGULATORY ANALYST**

Signature

*Kim Ligon*

Date

**09/08/2004**

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