

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OM B No 1004-0135
Expires: January 31, 2004

OCD - Artesia

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.

1 Type of Well <input checked="" type="checkbox"/> Oil Well (ILI) <input type="checkbox"/> Gas Well (ILI) <input type="checkbox"/> Other	5. Lease Serial No. NM-06767
2 Name of Operator Shackelford Oil Co.	6. If Indian, Allottee or Tribe Name
3a Address Midland, Texas 79705 3510 N. 4th St. Bldg. B Ste 100	7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) 432-682-9784	8. Well Name and No. Lebow Fed.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980' FNL AND 1850' FEL SEC. 25 T19S R030E	9. API Well No. #7 3001504635
	10. Field and Pool, or Exploratory Area Hackberry Seven River
	11. County or Parish, State Eddy 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 checked="" 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 checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input 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 recompleat 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 recompleat 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 operator has determined that the site is ready for final inspection.)

1-6-11 - 1st plug - @ 2068' to 1711' w/ 30 SXS - Tagged
1-7-11 2nd plug - @ 1710' to 1180' w/ 50 SXS - Tagged
1-13-11 3rd plug - @ perf. well @ 1150' cir. cement inside 4 1/2 to 390' + behind 7" 4 85/8 to surface - Tagged
1-14-11 4th plug @ perf @ 380' cir cement inside 40' out of 4 1/2 to Surface - 50 SXS
1-18-11 5. - cut well head - cement @ surface - installed Dry Hole Marker 1-18-11

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RECLAMATION

Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

Art Marquez

Signature

Title

Operation Manager

Date

1-19-11

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

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

Office

Date

NOV 27 2011

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)

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NMOCD ARTESIA

Accepted for record

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