

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.**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other <u>Water Injection</u>	5. Lease Serial No. <u>LC-068064</u>
2. Name of Operator <u>CBS Operating Corp.</u>	6. If Indian, Allottee or Tribe Name
3a. Address <u>P O Box 2236</u> <u>Midland TX 79702</u>	7. If Unit or CA/Agreement, Name and/or No. <u>North Square Lake Unit</u>
3b. Phone No. (include area code) <u>432/685-0000</u>	8. Well Name and No. <u>North Square Lake Unit 8</u>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <u>1980' FSL &amp; 660' FEL UL I Sec 20 T16S R31E</u>	9. API Well No. <u>30-015-04864</u>
	10. Field and Pool, or Exploratory Area <u>Square Lake GB-SA</u>
	11. County or Parish, State <u>Eddy NM</u>

## 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 checked="" type="checkbox"/> Other <u>Return to injection</u>
	<input type="checkbox"/> Change Plans	<input 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.)

12-12-05 MI & RU. POH with PC tubing and packer. Found bad rubbers on packer. Clean out salt ring to 3604'. RIH with new packer, circulate packer fluid, set packer at 3232'.

12-15-05 MIT Tested backside to 500# with NMOCD representative. Held, chart with NMOCD. Return well to injection.

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

M. A. Sirgo, IIITitle Engineer

Signature

M. A. SirgoDate December 21, 2005**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)

**Accepted for record - NMOCD**