Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010

5. Lease Serial No. NM - 108958

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

abandoned well.						
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7. If Unit of CA/Agre	ement, Name	and/or No
1 Type of Well Oil Well Gas Well Other		NO	V 0 5 2007	8. Well Name and No 1724 FEDERAL CO	OM #151	
2. Name of Operator LCX ENERGY, LLC		OCD-ARTESIA		9. API Well No. 30-015-35665		
3a. Address 110 N MARIENFELD, SUITE 200, MIDLAND,	3b. Phone No. (include area code) 432-262-4013		10 Field and Pool or COTTONWOOD CI			
4 Location of Well (Footage, Sec., T.,	_ L		11. Country or Parish,	State		
300' FEL & 1880' FNL SECTION 15, T16S, R			EDDY COUNTY, N	EW MEXIC)	
12 CHEC	CK THE APPROPRIATE BO	OX(ES) TO INDICATE ?	NATURE OF NOTION	CE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION			TYPE OF ACT	ION		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	_	uction (Start/Resume)	☐ Well	er Shut-Off Integrity
Subsequent Report	Casing Repair	New Construct		omplete	Othe	5 1/2 CSG.
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Aban Plug Back		porarıly Abandon er Disposal	1	
Attach the Bond under which the violation following completion of the involvitesting has been completed. Final determined that the site is ready fo 08/18/07 Run 1 Float Shoe 303A, P.O., 93 5 1/2" N-80 LT&C 17# casing +5%D44BWOW+0 3%D112. Tail - 3 down BOP. Set Slips & nipple up tu	ed operations. If the operations and operations of the operation of the op	ion results in a multiple c be filed only after all req 17# N-80, 1 Float Colli ulate casing. Cement c 2%D174+D112+0.6%D	ompletion or recompuirements, including ar 402A 17#, 104 ji asing with lead - 4	oletion in a new interval reclamation, have been ts 5 1/2" N-80 BT&C 130 sx 50/50 POZ+10	I, a Form 316 n completed a 17#, 1 5 1/2 %D20+0.12 ierve pit. W	0-4 must be filed once and the operator has " 17# BT&C & LT&C X-25ppsD130+0.2%D46
14 I hereby certify that the foregoing is t Name (Printed/Typed) Vickie L. Gotcher	rue and correct.	Title F	Regulatory Analyst			
Signature Violie L. Bôtcher		Date (Date 09/24/2007			
ACCEPTED FOI	RECOURSDSPACE	FOR FEDERAL O	OR STATE OF	FICE USE		
I NOV	DR. GLAS	<u>Tı</u>	tle		Date	
Conditions of approval, if any, are attached that the applicant holds legal or equitable tentitle the applicant to conduct operations	itle to those rights in the subje	ct lease which would O	ffice			
Title 18 U.S.C. Section 1001 and Pull 4 fictitious or flaudulent statements of representations.	NGINEER 1212, make it sentations as to any matter wi	a crime for any person kno thin its jurisdiction	wingly and willfully t	o make to any departmer	nt or agency o	f the United States any false
(Instructions on page 2)						