Form 3160-5 (April 2004)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED OMB NO. 1004-0137 Expires March 31, 2007



5. Lease Serial No.

6. If Indian, Allottee or Tribe Name

See Below

## 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.

				4		
SUBMIT IN TRIPLICATE - Other instructions on reverse side				7. If Unit or CA/Agreement, Name and/or No		
1. Type of Well  X Oil Well Gas Well Other		DEC - 4 2008		8. Well Name and No. Red Lake Wells		
2. Name of Operator		OCD-ARTESIA				
Nearburg Producing Company				9. API Well N	No	
		b. Phone No. (include ar	ea code)		15 00789	
3300 N A St., Bldg 2, Suite 120, Mi		432/686-8235		10. Field and	Pool, or Exploratory A	rea
4. Location of Well (Footage, Sec., T., R., M., or Survey I	Description)					
·				11 County o	11. County or Parish, State	
				<u>  Eddy</u>		<del></del>
12. CHECK APPROPRIATE	BOX(ES) TO INDIC	CATE NATURE OF N	NOTICE, REP	ORT, OR OT	HER DATA	
TYPE OF SUBMISSION		TYF	PE OF ACTION			
X Notice of Intent	Acidize	Deepen	Production	(Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture Treat	Reclamatio	nπ	Well Integrity	
Subsequent Report			Ħ			
	Casing Repair	New Construction	Recomplet		Other	
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporaril	ily Abandon		
	Convert to Injection	Plug Back	X Water Disp	osal		
NPC request to dispose of wtr from Red Lake 32G State #1	n the following wo	ederal #2			tate Com #1	
API #30-015-34316		517/ NMLC026874F	API #30-0			
Sec 32-17S-27E	Sec 33-17S-27E		Sec 32-17			
Eddy Co, NM	Eddy Co, NM		Eddy Co,	NM		
Into the following well by pipeline: ${}_{\Lambda, \text{CCEPTED FOR REC}}$			APPROVED			
Chalk Bluff Draw Federal #1		- 0.00			YLU	1
API #30-015-0078 <b>月</b> NMNM97122		DEC 3 - 5008				1
Sec 5, 18S, 27E		m: 14 Te	sencelta!	DEC 3	1003	1
Eddy Co. NM SUBJECT TO LIK	Gerry	Guye, Deputy Field In CD-Dictric', II AM		/s/ JD Wi		1
APPROVAL BY	STATE $_{ m NMO}$	CD-Dictere, n An		191 0D VVI	illock dr	1
				LOFLAND	MANAGEME <b>NT</b>	l
4			CA	O OF LAND I	DAFFIAR	
<ol> <li>I hereby certify that the foregoing is true and correct Name (Printed/Typed)</li> </ol>		Title	L	TEODINO TIEL	D UITIGE	]
// Sarah Jordan		Product	ion Analyst			
La Condant		Date 11/25/08				
THIS	SPACE FOR FEDER	AL OR STATE OFFI	CE USE			
Approved by		Title		Da	te	
Conditions of approval, if any, are attached. Approval of certify that the applicant holds legal or equitable title to the which would entitle the applicant to conduct operations the	hose rights in the subject	nt or Office lease		-		