

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OMB No 1004-0137
Expires March 31, 2007

RM

JUL 13 2009

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

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

NADEL AND GUSSMAN HEYCO, LLC

3a. Address

PO BOX 1936 ~ ROSWELL NM 88202-1936

3b. Phone No. (include area code)

505/623/6601

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

1697' FSL & 1600' FEL, Sec. 13: T18S, R31E

Case Serial No

NMNM-106718

6 If Indian, Allottee or Tribe Name

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

8 Well Name and No.

South Taylor 13 Federal #5

9 API Well No.

30-015-37092

10. Field and Pool, or Exploratory Area

East Shugart Delaware

11. County or Parish, State

Eddy, New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent
☐ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|--|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input type="checkbox"/> Other |
| <input checked="" 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.)

Variance for flex hose from BOP to choke manifold.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

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

Keith Cannon

Title Drilling Superintendent

Signature

Date

07/02/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Roger B. Hall

Petroleum Engineer

JUL 06 2009

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

Office

Carlsbad Field Office

Title 18 USC Section 1001 and Title 43 USC 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)

702

07/02/2009 14:38 FAX 4323332492

MIDWEST HOSE

001

JUL 2 2009 4:26PM

MIDWEST HOSE & SPEC

NO. 845

P. 1

TO: MWH ODESSA

MIDWEST

HOSE AND SPECIALTY INC.

INTERNAL HYDROSTATIC TEST REPORT		
Customer: BURNSCO BOPI/CAMERON		P.O. Number: 11182
HOSE SPECIFICATIONS		
Type: CHOKE & KILL	Length: 15'	
I.D. 3" INCHES	O.D. 5"	
WORKING PRESSURE 5,000 PSI	TEST PRESSURE 10,000	BURST PRESSURE
COUPLINGS		
Stem Part No. D3.0X48BW	Formule No. D3.0X48BW	
Type of Coupling: 3-1/8 BK FLANGE (N/45)	Die Size:	
PROCEDURE		
/Hose burstable pressure tested with water at ambient temperature.		
TIME HELD AT TEST PRESSURE 1 MIN		ACTUAL BURST PRESSURE: 0 PSI
COMMENTS: INV#09038		
Date: 10/21/2008	Tested By: BOBBY FINK	Approved: BRENT BURNETT

Eagle Rock

PECOS DISTRICT
CONDITIONS OF APPROVAL
July 6, 2009

OPERATOR'S NAME:	Nadel and Gussman HEYCO, LLC
LEASE NO.:	NMNM-106718
WELL NAME & NO.:	South Taylor 13 Federal #5
SURFACE HOLE	1697' FSL & 1600' FEL
FOOTAGE:	
BOTTOM HOLE FOOTAGE	1697' FSL & 1600' FEL
LOCATION:	Section 13, T. 18S., R 31E., NMPM
COUNTY:	Eddy County, New Mexico

1. Variance approved to use flex line from the BOP to the choke manifold.
Manufacturer : Midwest Hose & Speciality Inc.
Length : 15-16'
Size : 3-1/8" 5,000# AFI Flanges, WP Rating – 5,000#
I.D. 3.0", O.D. 6.0"
Anchors required by manufacturer
2. Check condition of 3-1/8" flexible line from BOP to choke manifold. Replace if exterior is damaged or if line fails test.
3. Line to be as straight as possible with no hard bends.
4. Anchors to be installed.

RGH 070609