Form 3160-5 (April 2004)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

## SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED OM B No 1004-0137 Expires March 31, 2007

5 Lease Senal No LC-029435-A

Do not use this form for proposals to drill or abandoned well. Use Form 3160-3 (APD) for s		6 If Indian, Allottee o	r Tribe Name
SUBMIT IN TRIPLICATE- Other instructions o	n reverse side.	7. If Unit or CA/Agreement, Name and/or No	
1 Type of Well ☐ ☐ Gas Well ☐ ☐ ✓ Other		8 Well Name and No	RECEIVE
2 Name of Operator Merit Energy Company		J. L. Keel A #3  9 API Well No	NOV - 2 2009
3a Address       3b Phone No (include area code)         13727 Noel Rd. Suite 500 Dallás, Texas 75240       972-628-1569		30-015-05091 ·10 Field and Pool, or I	AMOOD ARTE
4 Location of Well (Footage, Sec., T, R, M., or Survey Description)		Grayburg-Jacks	
330' FSL & 1650' FWL Sec. 7-T17S-R31E			State
		Eddy Co., New Mexico	
12: CHECK APPROPRIATE BOX(ES) TO INDICATE	NATURE OF NOTICE, RI	EPORT, OR OTHER	DATA
TYPE OF SUBMISSION	TYPE OF ACTION		
Acidize Deepen  Alter Casing Fracture T  Subsequent Report Casing Repair New Cond  Change Plans Plug and A  Convert to Injection Plug Back	Struction Recomplete Abandon Temporarily Ab	₩ell Other	r Shut-Off Integrity
If the proposal is to deepen directionally or recomplete horizontally, give subsurfa Attach the Bond under which the work will be performed or provide the Bond No following completion of the involved operations. If the operation results in a multiesting has been completed. Final Abandonment Notices shall be filed only after determined that the site is ready for final inspection.)  09/18/2009 RU. Started flowing well down. 09/20/2009 Unset pkr. Flange up BOP. PU collars & bit. PU workstr. 09/22/2009 Started cleaning out fill from 2782' - 3340' (iron sulfide so 09/23/2009 Bled well down. RU hydro testers. PU pkr. Found hole in ND BOPD. Packed off & tested to 500 psi for 30 mins. Good test. RD 10/02/2009 Run State Witnessed MIT. Witnessed by NMOCD Richa	o on file with BLM/BIA Require tiple completion or recompletion in all requirements, including reclamating Tag fill @ 2782'. cale). Circulate clean. RD. COntog. @ 2696'. Replaced bad to MO.	ed subsequent reports shall n a new interval, a Form 3 ation, have been complete the LD. LD collars. bg. Circulated pkr. flu	be filed within 30 days 160-4 shall be filed once d, and the operator has id. Latched back on.
		ACCEPTE	D FOR RECO
	•	1.	
RI-NMOTO 11/17/09			T 2 7 2009 Whitlock Jr
14. Thereby certify that the foregoing is true and correct Name (Printed/Typed)		BUREAU O	ELAND MANAGEME : : : BAD FIELD OFFICE
Lynne Moon	Title Regulatory Manager	O/MEO	3/10 1 1EED 011.0E
Signature Moon	Date 10/16/2009		
THIS SPACE FOR FEDERAL	OR STATE OFFICE	USE	
Approved by  Conditions of approval, if any, are attached. Approval of this notice does not warra certify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon	nt or	Title Date Office	
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any	nercon knowingly and wellfully t	o make to any departmen	at or agency of the United

States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

