

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED  
OMB No 1004-0135  
Expires November 30, 2000

**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**

RECEIVED  
DEC - 9 2009  
NMOCD ARTESIA

1 Type of Well  
☒ Oil Well ☐ Gas Well ☐ Other

2 Name of Operator  
SALADO OPERATING/NMOCD

3a. Address  
1301 W. GRAND AVE. ARTESIA, NM 88210

3b Phone No. (include area code)  
575-748-1283

4. Location of Well (Footage, Sec, T., R., M., or Survey Description)  
SEC 1, T16S, R30E

5 Lease Serial No  
NM 06407A

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No  
EAST HENSHAW UNIT #4N

9 API Well No.  
-30-015-03815

10. Field and Pool, or Exploratory Area

11. County or Parish, State  
EDDY CO, NM

**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 Treatment	<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 type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input checked="" 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	

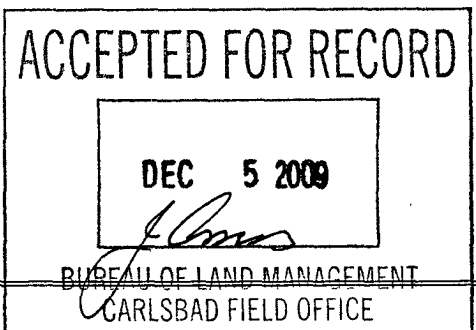
13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical 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 file within 30 days following completion of the involved operations. If the operation results in a mutiple completion or recompleation 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 )

10/9/09 CIRCULATE PLUGGING MUD - SPOT 25 SACKS @ 2932' ON TOP OF CIBP - PERF @ 1594' - HELD - PUMP 25 Sacks @ 1644' - TAG @ 1341'

10/12/2009 PERF @ 531' - PUMP 35 SACKS - TAG @ 420' - PERF @ 60' - CIRCULATE 25 SACKS TO SURFACE

INSTALL PA MARKER - LEVEL LOCATION

Accepted as to plugging of the well bore.  
Liability under bond is retained until  
Surface restoration is completed.



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

MARK HOSKINS

Title AGENT FOR NMOCD

Signature

Date 11-30-09

**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