Form 3160-5 (February 2005)

(Instructions on page 2)

At 5/31/2011

## **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

## SUNDRY NOTICES AND REPORTS ON WELLS

abandoned well. Use Form 3160-3 (APD) for such proposals.					
SUBMIT IN TRIPLICATE - Other instructions on page 2.				7. If Unit of CA/Agreement, Name and/or No.	
1. Type of Well  Gas Well Other			8. Well Name a	8. Well Name and No.	
2. Name of Operator 5. C. W. lling uses			9. API Well No	9. API Well No. 30-015-25529	
3a. Address    X   G   M   O   A   M   X    4. Location of Well (Footage, Sec., T., R., M., or Survey Description		3b. Phone No. (include area co	ode) 10. Field and P	10. Field and Pool or Exploratory Area  11. Country or Parish, State	
/ /	L 5 25/7265/1		٠ ٠	FODY CU NM	
7	4 . / - / -	OX(ES) TO INDICATE NATUR			
TYPE OF SUBMISSION	I I I I I I I I I I I I I I I I I I I		YPE OF ACTION	COMERCIA	
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat		oduction (Start/Resume) Water Shut-Off	
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily Abandon	Other	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	Water Disposal	
determined that the site is ready for  1 SET CIBP @ 3  2 SET 25 SIC P  3 CUT 41/2 CS9  4 SET 505 K Plug  5 SET 500' SURFA  6 ERECT DRY HOTE  7. CIERNA RIP  8. RESEED PER	050 5 pot 2 Pluge 1855, 7 @ 1145' TAG PLE Plug 1709 E MAKICER LOC BLM REC	plug Tope 9	csg All &		
14. I hereby certify that the foregoing is to Name (Printed Typed)  ARE// FOIMAR	rue and correct.	Title A	ENX		
Signature ALON Ac	lma	Date 5/10	4//		
	THIS SPACE	FOR FEDERAL OR ST	ATE OFFICE USE		
Approved by  Conditions of approval, if any, are attached that the applicant holds legal or equitable to notitle the applicant to conduct operations to the last of the last o	tle to those rights in the subjec hereon.	t lease which would Office	nd willfully to make to any dep	Date  Dartment or agency of the United States	
ictitious or fraudulent statements or repre					

Accepted for record NMOCD