Form 3160-5 (August 1999)

(Instructions on reverse)

**UNITED STATES** 

New Mexico Oli Conservation Division, Displays

S 1625 N. French Drive OMB No. 18

NTERIOR 1625 N. French Drive OMB No. 18

GEMENT 1625 A. Lease Serial No.

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

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

ALLED DV MATIATA		
SUNDRY NOTICES	AND REPORTS ON WELLS	

Do not use this form for proposals to drill or to re-enter an

5. Lease Serial No. NMNM68821

5.	If Indian.	Allottee or Tribe Name

abandoned we	ell. Use Form 3160-3 (AP	D) for su	ch proposal	s.		o. Il Ilidiai	i, And	nuce of Tribe Name	
	PLICATE - Other instru	letions.	on reverse	side		7. If Unit o	or CA	Agreement, Name and/or No.	
1. Type of Well ☐ Oil Well ☒ Gas Well ☐	Other					9 Well Me		ANT	
2. Name of Operator					8. Well Name and No. Paloma 30 Federal 01				
water the state of				9. API Well No. 30-025-36969					
3a. Address P. O. Box 11050 Midland TX 79702-8050			3b. Phone No. (include area code) (432)687-2992			10. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec. 660' FNL & 2100' FEL Sec.	ation of Well (Footage, Sec., T., R., M., or Survey Description) NL & 2100' FEL Sec. 30, T23S, R34E				Bell Lake				
						Lea	or Pa	rish, State	
						New Me			
12. CHECK AP	PROPRIATE BOX(ES) T	O INDIC	ATE NATU	RE O	F NOTICE, R	EPORT, O	R O	THER DATA	
TYPE OF SUBMISSION		·	TY	PE O	F ACTION				
☐ Notice of Intent	Acidize	Deep			Production (Star	t/ Resume)		Water Shut-Off	
X Subsequent Report	☐ Alter Casing ☐ Casing Repair		ture Treat		Reclamation			Well Integrity Other Production Csg.	
	Casing Repair Change Plans		Construction and Abandon		Recomplete Temporarily Aba	andon	X	Other Floudction Csg.	
☐ Final Abandonment Notice	Convert to Injection		Back		Water Disposal	andon			
3-11-05 RIH w/206 jts. tbg POOH to 13,089', rev. spo Swab 3-16-05 MIRU BJ Frac Se 000 scf N2, 80 tons Co2.	ot acid, set Arrow Set pki	r @ 13,0	89.' ND RO	P, N	J wellhead, p	ress. up B	5 #6 % - 15 OC 60	/1000#, fùn acid job.	
14. I hereby certify that the foregoing	ng is true and correct	· - <del>-</del>	1		<del></del>				
Name (Printed/Typed) Brenda Coffman			Title Regul	atory	Analyst				
Signature School	e Coffma		Date 03/29/	2005	)				
		FORJEE	ERAL OR S	TATE	OFFICE USE				
Approved by Approved by	) DAVID R. GLASS	···		Title			Date	And the state of t	
Conditions of approval, if any, are certify that the applicant holds lega which would entitle the applicant to DAVID Title 18 U.S.C Section 1901 makes	or equitable title to those right conduct operations thereon.	s in the sul	oject lease	Office ke to a	ny department o-	agency of the	17-24	and States and St. C	
fraudulent statements or representa	tions as to any matter within its	inriediatio	to ma	a	, ասբառուտու Ս	agoney or till	omit	co dianes any raise, fictitious or	