

Form 3160-5
(August 1999)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

5. Lease Serial No.

NM - 054031

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other Instructions on reverse side

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

Cotton Draw Unit

8. Well Name and No.

Cotton Draw Unit #72

9. API Well No.

30 025 22738

10. Field and Pool, or Exploratory Area

Paduca Delaware, North

11. County or Parish, State

Lea County, N.M.

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

2. Name of Operator
Sahara Operating Company

3a. Address
P.O. Box 4130, Midland, TX 79704

3b. Phone No. (include area code)
915/697-0967

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
**660' FSL & 660' FEL, Sec 33, T24S, R32E, NMPM
Unit Letter "P"**

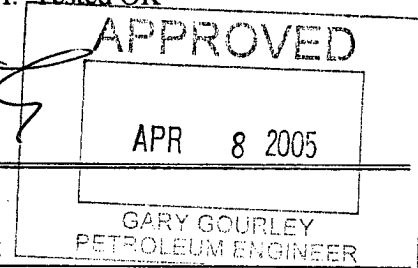
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

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 checked="" 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 type="checkbox"/> Plug and Abandon	<input checked="" 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.)

Sahara Operating respectfully requests an extension of TA status for this well in order to evaluate the well for future production or for utilization in an improved recovery project. The well passed an integrity test on 4-26-2002 as below. Current approval for TA status expires 4/26/05

04/26/2002 Tested casing & plug to 530# per Pat Hutchings, BLM. Tested OK
Pressure chart submitted



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

Robert McAlpine

Title **President**

Signature

Date **04-05-2005**

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

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. 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.

GWW