

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

FORM APPROVED
OMB No. 1004-0135
Expires January 31, 2004

SUBMIT IN TRIPLICATE - Other instructions on reverse side

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

2. Name of Operator **KELTON OPERATING CORP**

3a. Address **1510 HERITAGE, ANDREWS, TX 77114**

3b. Phone No. (include area code) **432.524.6400**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SWSE SEC 15-25S-37E

5. Lease Serial No.
Fee

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
8910115760

8. Well Name and No.
LMQU #24

9. API Well No.
30-025-11600

10. Field and Pool, or Exploratory Area
LM, QUEEN, 7 RIVERS, GB

11. County or Parish, State
LEA, NM

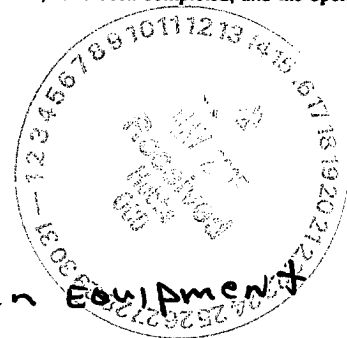
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 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 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 recompletion 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.)

- ① MOVE IN Pumping Unit.
- ② Repair downhole equipment if needed.
- ③ Return well to production

Estimated start date: 5-1-2005 or when equipment and service rigs available.



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

C. DALE KELTON

Title **PRESIDENT**

Signature

C. Dale Kelton

Date

4-6-2005

ACCEPTED FOR RECORD - THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

DAVID R. CLARK

Conditions of approval, if any, are attached. Approval of this notice does not warrant the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.

Title 18 U.S.C. Section 1001 and Title 18 U.S.C. Section 1212, make it a crime for States any false, fictitious, or fraudulent statements or representations as to any matter.

Accepted For Record Only! Approval Subject To Returning Well To Continuous Production And Keeping Well On Continuous Production! Well Must Be Plugged If Production Ceases!

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(Instructions on Reverse)

GWW