New Maxico Oil Conservation Division, District I

1625 N. French Drive Hobbs, NM 88249

Form 3160-5

UNITED STATES

FORM APPROVED

(September 2001)	DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT				Expires January 31, 2004		
				5. Lease Serial No. LC 030132-B			
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.				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.		
1. Type of Well Oil Well Gas Well Other				8. Well Name and No.			
2. Name of Operator					Closson B, Well #3		
Melrose Operating Co. 3a. Address 3b. Phone No. (include area code)				9. API Well No. 30 025 08962			
3a. Address c/o P.O. Box 953, Midland, TX 79702		432 684-6381		1 0. Field and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R., M. or Survey Description)		/		Jalmat (Tansil, Yates, Seven Rivers)			
, -				1 1. Cou	nty or Parish, State		
660' FNL & 330' FWL, Sect		Unito			inty, NM		
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATU	RE OF NOTICE, F	EPORT,	OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION				<u>,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,</u>		
	Acidize	Deepen .	Production (Sta	rt/Resume)	Water Shut-Off		
☐ Notice of Intent	Alter Casing	Fracture Treat	Reclamation		Well Integrity		
Subsequent Report	Casing Repair	New Construction	Recomplete		Que 2.13 14 7	5	
D	Change Plans	Plug and Abandon	Temporarily Al	oandon	9101112		
☐ Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal		/%	*&\	
following completion of the inv	gged CIBP. POOH, RU reverse un 3483'. Circulate hole. SION. N w/2 3/8" & SN . Swabbed dry. S bing to 3120', set packer & RU ac tinued swabbing.	results in a multiple comp filed only after all requi- it, RIH w/ 4 3/4" bit, star SION.	pletion or recompletion rements, including recl ted drilling up CIBP, cl	in a new int amation, ha eaned out w	vel to 3220' Circulate ho	all be filed once the operator has sion.	
14. 1 hereby certify that the foregoin Name (Printed/Typed) Ann E	g is true and correct 3. Ritchie	Title R	egulatory Agent				
Signature	MA Valok	Date 4-2	21-05				
	THIS SPACE F	OR FEDERAL OR ST	TATE OFFICE USE				
Approved by		Ti	ile		Date		
Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to c	attached. Approval of this notice all or equitable title to those rights	does not warrant or in the subject lease Of	fice			*.	

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.