Form 3160-5 (August 1999)

N.M. Oli Cons. Division

1625 N. French Dr.

UNITED STATES DEPARTMENT OF THE INTERIO HODDS, NM 88240 BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000 5. Lease Serial No.

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.					LC069515 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.	
Type of Well Oil Well Gas Well 2. Name of Operator	Other				8. Well Na	me and No. EL MAR UNIT NO. 22
QUAY VALLEY, INC.					9. API We	
P. O. BOX 10280, MIDLAND, TEXAS 79702 (432)06			o. (include area code) 7422		30-025-08278 10. Field and Pool, or Exploratory Area ELMAR DELAWARE 11. County or Parish, State LEA NM	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) UNIT LETTER J 1,980' FSL, & 1980' FEL SEC. 25, T 26 S, R 32 E						
12. CHECK AP	PROPRIATE BOX(ES)	TO INDICATE	NATURE	OF NOTICE, R	EPORT, OF	R OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION					
If the proposal is to deepen dire Attach the Bond under which t	ectionally or recomplete horizon he work will be performed or provolved operations. If the operational Abandonment Notices shall by for final inspection.) 4,625', TAG @4,256' OT PUMP INTO PERF @3,400' WOC & TAG @3,245' WOPC & TAG QUEEZE 60 SKS. WOO OULD NOT PUMP INTO INFACE	mally, give subsurrovide the Bond Notion results in a multiple filed only after a discount of the subsurround of the subsurroun	luding estima face locations to on file with tiple completiall requirement to NOT P	measured and true BLM/BIA. Require on or recompletion ats, including reclar TUMP INTO	any proposed overtical depths red subsequent in a new intermation, have be	Water Shut-Off Well Integrity Other work and approximate duration thereof of all pertinent markers and zones. reports shall be filed within 30 days val, a Form 3160-4 shall be filed once een completed, and the operator has
		ş- <u></u>	rface restor	ration is complete	64.	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) STELLA SWANSON			Title PRESIDENT			
Signature			Date 05/09/2003			
ADDD V	OVE THIS SPACE	FOR FEDERA	<u> </u>	TE OFFICE US	E	
Approved by (ORIG. SGD.) DAVID R. GLASS			Titl		220	Date
Conditions of approval, of AM, arcertify that the applicant holds leg which would entitle the applicant	e attauniou Approval of this near or equitable title to those ris	otice does not war	rant or Office	ce		