Form 3160-5 (August 1995)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

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

NMOCD

SUNDRY Do not use this abandoned well.	NOTICES AND form for propos Use Form 3160	REPORTS sals to drill -3 (APD) for	ON WELLS or to re-enter such proposal	an Is.
20,212, 527, 527				==

5.	Leas	se Serial No.			
	NM	94864			
6.	If In	dian, Allottee or Tribe Nam	K		•

SUBMIT IN TRIPLICATE - Other instructions on reverse side					o. If higher, Allottee of Thoe Name			
					7. If Unit o	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				EL ZORRO FREMONT FED. #2				
LAYTON ENTERPRISES, INC.			9. API Well No.					
3a. Address 3103 79th St. 3b. Phone No. (include area code)			30-0	30-025-34703				
Lubbock, Texas 79423 806/745-4638 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			10. Field an	nd Pool, or Ex	ploratory Area			
*	•)				son Pe		
1880' FNL 1:						or Parish, Sta		
Sec 1, T9S, F	R36E				Lea	County,	New Mexic	30
TYPE OF SUBMISSION			TYPE C	F ACTION				
Notice of Intent	Acidize	Deepen	a	Production (St	an/Resume)	☐ Wate	er Shut-Off	
Notice of Intent	Alter Casing	☐ Fracture Tr	est 🔾		,	☐ Well	Integrity	
Subsequent Report	Casing Repair	New Const	_			Othe	• •	
	Change Plans	Plug and A	_	Temporarily A	Ahandon			
☐ Final Abandonment Notice	Convert to Injection	Plug Back		Water Disposa		7 7 7 9 9		
13. Describe Proposed or Complete							7.7	
testing has been completed. Find determined that the site is ready Intend to convert the The Morrow Gas Zone Intend to set cast in a 11,752-60, Set C.I Perforate Bough C Zone Fiberglass lined tube and begin injection. Anticipated rates are Application has been which is attached. SUBJECT LIKE APP	for final inspection.) is well to water of is not economically ron bridge plug @ .B.P. @ 10,000 w/5 ne 9602-26 @ 4/ft ing w/plastic coate 200 to 1000 BD a made to New Mexically	disposal solve product. 11,700 w/s sx cemen, treat zolved packer	ervice. ive. 5 sx ceme t w/9# m ne w/1000 set @ 99	ent to co ud laden 0 gal 15% 550, Inst	ver Morr fluid bè HCl aci all surf	ow Perf tween p d, Run ace fac	s 2 vertical section of the section	
BA NMOC		SWD	-996	, 2	DET	GARY GO	URLEY ENGINEER	
14. I hereby certify that the foregoin Name (Printed/Typed) DONALD R. LAYT	///			sident				
Signature Mald	Later	7	Date 9-7	'- 05		•		
<u>/</u> -	THIS SPACE	FOR FEDERA	L OR STAT	E OFFICE U	SE			
Approved by			Title		··· · · · · · · · · · · · · · · · · ·	Date		
Conditions of approval, if any, are certify that the applicant holds leg which would entitle the applicant to	ral or equitable title to those rig	ice does not warr this in the subject	ant or Office					