Form 3160-5 (April 2004)

OCD-HOBBS

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| FORM APPROVED |
|------------------------|
| OMB NO. 1004-0137 |
| Expires March 31, 2007 |

5. Lease Serial No.

SUNDRY NOTICES AND REPORTS ON WELLS

NMNM4314
6. If Indian, Allottee or Tribe Name

| Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. | | O. II Indiai | 7. If Unit or CA/Agreement, Name and/or No. 8. Well Name and No. Mescalero 6 Federal #1 | | |
|--|-------------------------|-------------------------------|--|--|---------------|
| SUBMIT IN TRIPLICATE - Other instructions on reverse side 1. Type of Well X Oil Well Gas Well Other 2. Name of Operator | | | | | 7. If Unit o |
| | | | | | Mescale #1 |
| Nearburg Producing Company | <u> </u> | 2h Phone No. (include ar | 9. API We | | |
| 3a. Address 3b. Phone No. (include area code) 3300 N A St., Bldg 2, Ste 120, Midland, TX 79705 432/686-8235 | | 30-023- | 37570 and Pool, or Exploratory Area | | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey D | | 1 4327000 0235_ | | ne Springs | |
| 660 FNL and 1980 FWL, Sec 6, 19S, 34 | | | | | |
| 000 THE GIR 1300 THE, 000 0, 150, 012 | | 11. Coun | 11. County or Parish, State | | |
| | | | Lea | NM | |
| 12. CHECK APPROPRIATE | BOX(ES) TO INI | DICATE NATURE OF I | NOTICE, REPORT, OR | OTHER DATA | |
| TYPE OF SUBMISSION | | | PE OF ACTION | | |
| X Notice of Intent | Acidize | Deepen | Production (Start/Resum | e) Water Shut-Off | |
| | Alter Casing | Fracture Treat | Reclamation | Well Integrity | |
| Subsequent Report | | New Construction | Recomplete | X Other Name | |
| | Casing Repair | | | | |
| Final Abandonment Notice | Change Plans | Plug and Abandon | Temporarily Abandon | Change | |
| | Convert to Injecti | ion Plug Back | Water Disposal | | |
| determined that the final site is ready for final inspec NPC requests to change the name at from: Mescalero 6 Federal #1 to: | • | | To the state of th | 200 | |
| Mescalero Unit 6 Federal #1 | | | Constant de Angle | s :: : : : : : : : : : : : : : : : : : | |
| 14. I hereby dertify that the foregoing is true and correct | | Title | | | |
| 14. I hereby dertify that the foregoing is true and correct Name (Printed/Typed) Sarah Jordan | Dunadical day / Day | | tion/ Regulatory An | alvet | |
| | | Date 12/30/0 | | diyst | |
| ACCEPTED ACIPACION | | DERAL OR STATE OF | | · | |
| | | | FIVE USE | T Date | |
| Approved by JAN 2 5 2006 | | Title | | Date | |
| Conditions of approval, if any, are attached. Approval o certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations if | those rights in the sul | warrant or Office bject lease | | | |



Title 18 U.S.C. Section 110 Cand States any false, fictitious or fraude Section 12 2, makes it a crime for any person knowingly and willfully to make to any department or agency of the United tements or representations as to any matter within its jurisdiction.