

OCD-HOBBS

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NM99048
2. Name of Operator CAZA OPERATING, LLC		6. If Indian, Allottee or Tribe Name
3a. Address 200 N. LORAIN, SUITE 1550, MIDLAND, TX, 79701	3b. Phone No. (include area code) 432 682 7424	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL & 1980 FWL, SEC 15, T-20-S, R-34-E, LEA COUNTY, NEW MEXICO		8. Well Name and No. MUD SLIDE SLIM 15 FED # 1
Unit F		9. API Well No. 30 025 38469
		10. Field and Pool, or Exploratory Area LAGUNA VALLEY MORROW
		11. County or Parish, State LEA COUNTY, NEW MEXICO

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" 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 checked="" type="checkbox"/> Other SET 9 5/8"
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	INTERMEDIATE
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	CASING.

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 recompleat 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.)

TD 12.25 inch hole @ 5525 ft, 18:00 Hrs CST 1/25/08. Log well with HES. R/U & run 129 joints 9 5/8 inch 40# P-110 & HCL-80 LTC to 5525 ft. Casing Packer @ 3591 ft & stage tool @ 3546 ft. Cemented 1st stage with 330 Sks 35:65 Poz "C" + 6% gel + 5% salt mixed @ 12.4 ppg. Tailed with 200 Sks "C" with 1% calcium chloride mixed @ 14.8 ppg. Plug down okay. Set packer. Open stage tool @ 3546 ft. circulated 5 1/2 hrs. Did not recover cement above packer. Cemented 2nd stage with 1245 sks 35:65:6 Poz "C" + 6% gel & 5% salt mixed @ 12.4 ppg. Tailed with 100 sks "C" with 1% calcium chloride mixed @ 14.8 ppg. Closed tool okay. CIRCULATED 75 SKS EXCESS. JOB WITNESSED BY PATRICIA HUTCHINGS BLM INSPECTOR. Nipped up 5000 psi WP BOPE. Tested same with third-party. Drilled stage tool & float equipment. Tested Casing to 1900 psi for 30 minutes. Okay. Drilled 4 ft formation & tested casing shoe to 13 ppg MWE. 1350 Psi with 8-4 ppg mud. Start Drilling 8.5 inch hole @ 10:00 hrs CST 1/30/08.

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MAR 26 2008

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

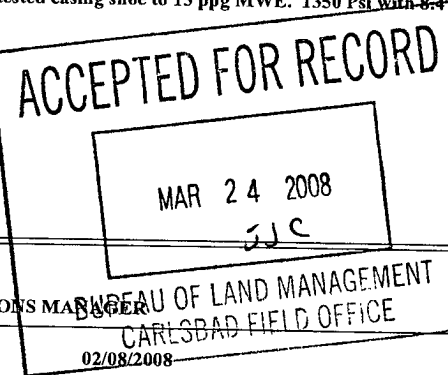
RICHARD L. WRIGHT

Signature

Title OPERATIONS MANAGER

Date

02/08/2008



THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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

OCD DISTRICT SUPERVISOR/GENERAL MANAGER

Date

APR 29 2008

Office

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.

(Instructions on page 2)