

UNITED STATES
DEPARTMENT OF THE INTERIOR **OCD-HOBBS**
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

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.

5. Lease Serial No.
LC-030181-a

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE – Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
TORA OIL & GAS, LLC

3a. Address
C/O OIL REPORTS & GAS SERVICES, INC.
1008 W. BROADWAY, HOBBS, NM 88240

3b. Phone No. (include area code)
575-393-2727

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.
HG MOBERLY "A" FEDERAL #3

9. API Well No.
30-025-34135

10. Field and Pool or Exploratory Area
RHODES: Y-SR

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

2310' FSL & 660' FEL, SEC. 08, T26S, R37E

11. Country or Parish, State
LEA CO., NM

12. CHECK THE 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 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 <u>CHANGE OF OPERATOR</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

AS REQUIRED BY 43 CFR 3100.05 (A) AND 43 CFR 3162.3 WE ARE NOTIFYING YOU OF A CHANGE OF OPERATOR NAME ON THE ABOVE LEASE. TORA OIL & GAS, LLC, AS OPERATOR, ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASE OR PORTION OF THE LEASE DESCRIBED THEREOF.

BOND COVERAGE: \$25,000.00 STATEWIDE COVERAGE

BOND NUMBER: RLB0008450

EFFECTIVE DATE: JANUARY 1, 2008

OPER. COORD NO. 258589
PROPERTY NO. 305214
POOL CODE 52250
EFF. DATE 01/01/08
API NO. 30-025-34135

RECEIVED

MAR 25 2008

HOBBS OCD

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

GAYE HEARD

Title AGENT

Signature

Gaye Heard

Date 03/11/2008

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.

Title

Office

APPROVED

MAR 20 2008

Date

BUREAU OF LAND MANAGEMENT
CARLSBAD DISTRICT 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)

FOR RECORD ONLY