RECEIVE

Form 3160-5 SEP 2 2 2008 UNITED STATES (August 2007) SEP 2 2 2008 UNITED STATES
BUREAU OF LAND MANAGEMENT
BUREAU OF LAND REPORTS ON W

fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

OCD-HOBBS

FORM APPROVED
OMB No 1004-0137
Expuses July 31, 2010

Expires Tuly 31, 2010

5	Ľ	ease	Serial	Ν
L	0	067	Serial 968	

Do not use this f	Offices and REPOR orm for proposals to Use Form 3160-3 (APL	drill or to	re-enter an	s.	6. If Indian, Allottee or	Tribe Name	
SUBMIT 1. Type of Well	FIN TRIPLICATE - Other ins	7. If Unit of CA/Agreement, Name and/or No. NMNM71057A					
Oil Well Gas W	'ell ☐ Other / V		8. Well Name and No. West dollarhide Queen Sand Unit #81				
2. Name of Operator Chaparral E	Energy, L.L.C.		9. API Well No. 30-025-30011				
3a. Address 701 Cedar Lake Blvd , Oklahoma City, Okla		ínclude area coa	de)	10. Field and Pool or Exploratory Area Dolarhide Queen			
4. Location of Well (Footage, Sec , T., I 1700 FNL & 330 FEL (Unit Letter H) Sec 30-T24				11 Country or Parish, State Lea County, New Mexico			
12 CHEC	K THE APPROPRIATE BOX(I	ES) TO INDI	CATE NATURE	E OF NOTIC	CE, REPORT OR OTHE	R DATA	
TYPE OF SUBMISSION			TYPE OF ACTION				
Notice of Intent ✓ Subsequent Report	Acidize Alter Casing Casing Repair Change Plans	New C	n re Treat onstruction nd Abandon	Recla	action (Start/Resume) amation mplete corarily Abandon	Water Shut-Off Well Integrity Other	
Final Abandonment Notice	Convert to Injection	Plug B	ack	☐ Wate	r Disposal		
following completion of the involve testing has been completed. Final A determined that the site is ready for To return this TA'd well to active proout hole to 3955'. POOH w/ bit and F & flange up WH. RIH w/rod pump & If well goes off production 30 days notify BLM by 5 business	Abandonment Notices must be f final inspection) duction. Moved in WO Unit at RIH w/ mud anchor, seating n space out. Well is testing ½ E	iled only after nd Unflanger ipple and 12 3OPD, 126 E	d WH & put on	s, including	w/ 4¾" tooth bit and dr. Strip off BOP & put or ip. Production ACCEPTED SEP /s/ JD BUREAU OF L	completed and the operator has	
14 I hereby certify that the foregoing is tr	ue and correct Name (Printed/Ty	ped)					
David P. Spencer			Title Manager of Regulatory Affairs				
Signature Hould	Sperces	: n	Date 09/03/20)800)800			
	V THIS SPACE FO	R FEDER	AL OR ST	ATE OF	ICE USE		
Approved by		1 . 1, 1, 1,) - F - A 4		1/	SEP 2 4 2008	
Conditions of approval, if any, are attached that the applicant holds legal or equitable ti entitle the applicant to conduct operations t	tle to those rights in the subject lea hereon.	ase which wou	ld Office		DE	ate	
Title 18 U S C Section 1001 and Title 43 I	USC Section 1212, make it a cru	ne for any per	on knowingly an	ıd willfully t	o make to any department	or agency of the United States any false,	