Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OCD-Man 8

RECEIVED

FORM APPROVED
Budget Bureau No. 1004-0135
Expires March 31, 1993

5 Lease Designation and Serial No NMLC032579E

6 If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS this form for proposals to drill or to deepen or reentry JAN 20 2009

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use 'APPLICATION FOR PERMIT" HOBBSOCD

SUBMIT IN TRIPLICATE				7 If Unit or CA, Agreement Designation
1. Type of Well				
Oil Gas XX Well Well Other				8. Well Name and No
2 Name of Operator				Carlson B 25 #1
FULFER OIL & CATTLE CO. LLC				9 API Well No.
2 Address P.O. BOX 1224, JAL, NM 88252		Telephone No. 505-395-9970		30-025-11782
3. Location of Well (Footage, Sec., T.,R.,M., or Survey	Description)	303-393-9970		10 Field and Pool, or Exploratory Area Langlie Mattix; 7 Rvrs-Q-GB
				11 County or Parish, State
660' FSL & 660' FEL, Unit P, Sec. 25, T25S, R37E				Lea County, NM
12 CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT				Γ, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION			11-11-11-11-11-11-11-11-11-11-11-11-11-
Notice of Intent	Abandonment Recompletion			Change of Plans
X Subsequent Report	Plugging Back Casing Repair			New Construction Non-Routine Fracturing
Final Abandonment Notice	Altering Casing			Water Shut-Off Conversion to Injection
L	X Other Return to Production			Dispose Water (Note Report results of multiple completion on Well Completion or Recompletion Report and Log form)
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work)*				
Well was returned to production 11-13-08.				
24-hr test: 2 BO 0 BW & 0 MCF			^	
	A.C		100	CEDTED FOR DECORD
				CEPTED FOR RECORD
				JAN 4 2009
				10
			D	UREAU OF LAND MANAGEMENT
				CARLSBAD FIELD OFFICE
14. I hereby certify that the foregoing is true and correct				Tummer
	Title <u>Agent</u>	,	Date	12/11/08
(This space for Federal or State office use)		LEUM ENGINEER	~	FFR a a good
Approved by Conditions of approval, if any	itle		Date	FEB 2 0 2009