

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

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.

SUBMIT IN TRIPLICATE – Other instructions on page 2.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit of CA/Agreement, Name and/or No.
2. Name of Operator MELROSE OPERATING COMPANY 184860		8. Well Name and No. Closson "B" Fed, Well #11 25185
3a. Address c/o P.O. Box 953, Midland, TX 79702	3b. Phone No. (include area code) 432 6846381/2147620830	9. API Well No. 30 025 09098
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 30, T22S, R36E, 1980 FNL & 660 FEL, (H)		10. Field and Pool or Exploratory Area Jalmat, Tansil-Yates-7 Rvrs
		11. Country or Parish, State Lea County, 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 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" 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.)

8-13-08: Rigged up pulling unit. RIH w/2 3/8" tubing to 3458'. Pumped 100 sx Cl C, 2% CaCl cement. Wait on cement overnight.

8-14-08: RIH and tagged 1st plug @ 3441' Pumped 100 sx Cl C 1% CaCl. WOC 4 hrs. Rigged up wireline, tagged plug @ 2823' PU & shot squeeze holes ! 1690'. RIH w/squeeze packer & tubing to 1200', pumped 100 sx Cl C, 2% CaCl cement & displaced to 1400' RIH w/WL & tagged cement @ 1400'. Pulled up WL to 60', perforated squeeze holes WOC overnight.

8-15-08: RIH w/tubing, tagged plug @ 1400', BLM witnessed tag, pumped 30 bbls brine gel down 5 1/2" casing & circulated out. Waiting on cement trucks. Rigged down.

8-19-08: Rigged up pulling unit, pumped 25 sx, 6.25 bbls slurry, Cl C cement, 1.32 yield, circulated cement all the way around & out bradenhead. BLM witnessed. Closed bradenhead & pressured up on casing to 300# and shut well in, rigged down Rising Star. Cleaned up and left well closed in overnight.

8-20-08: Checked well, cement circulated to surface. Installed dry hole marker Anchors removed, flowlines & caliche. Will seed upon BLM approval.

RECEIVED

APR 07 2009

HOBBSOCD

Approved as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.

APPROVED

APR 4 2009

JAMES A. AMOS
SUPERVISOR-EPS

14 I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)

Ann E. Ritchie

Title Regulatory Agent

Signature

Date 03/16/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

[Signature]

DISTRICT 1 SUPERVISOR

Date

APR 08 2009

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.

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