Form 3160-5

| (April2004) | DEPARTMENT OF T | | , | OM B No 1004-0137 Expires: March 31, 2007 |
|--|--|---|--|--|
| | BUREAU OF LAND N | MANAGEMENT | • | 5. Lease Serial No. |
| SUNDRY | Y NOTICES AND | REPORTS ON WE | LLS | |
| Do not use t abandoned v | this form for proposa vell. Use Form 3160 - | als to drill or to re- 3 (APD) for such pr | enter an oposals. | 6. If Indian, Allottee or Tribe Name |
| SUBMIT IN TRIPLICATE - Other instructions on reverse side. | | | | 7. If Unit or CA/Agreement, Name and/or No |
| 1. Type of Well X Oil Well | Gas Well Otl | ner / | | NMNM101361X |
| | | | | 8. Well Name and No. |
| 2. Nameof Operator St. Mary Land & Exploration Co. | | | | Inca Battery 9. API Well No. |
| 3a. Address 3b. Phone No. (include area code) | | | | 30-025-29887 |
| 3300 N. A Street, Bldg. 7, Ste. 200 Midland, TX 797(\$32)688-1789 4 Location of Well (Footage, Sec , T , R., M , or Survey Description) | | | | 10 Field and Pool, or Exploratory Area Shugart; Delaware, East |
| 760 FNL & 330 FWL, UL:1, Sec. 19, T-18-S, R-32-E | | | | 11. County or Parish, State |
| NW4/NW4 | | | | Lea County, NM |
| 12. CHECK A | APPROPRIATE BOX(ES |)TO INDICATE NATU | RE OF NOTICE, R | EPORT, OR OTHER DATA |
| TYPEOF SUBMISSION | TYPEOF ACTION | | | |
| | Acidize | Deepen | Production (Sta | rt/Resume) |
| X Notice of Intent | AlterCasing | FractureTreat | Reclamation | Well Integrity |
| Subsequent Report | Casing Repair | New Construction | Recomplete | X OtherSubmittal of |
| Final Abandonment Notice | Change Plans | Plug and Abandon | Temporarily Ab | |
| | Convert to Injection | n Plug Back | Water Disposal | diagram |
| Security Diagram for the assures there is compli | e Inca Federal #1 Ba ance with the minimo ocument will be keep | attery, as per section um site security requ at St. Mary's office i | F - Self Inspection irements. In additional contents and additional contents are self-to-self- | ploration is submitting this Site on, to provide a current diagram thation to the submittal to the authorize and is available upon request dur |
| epted for Record Purpo | ses. KI | | | |
| roval Subject to Onsite | Inspections. | | RECEIVE | |
| : 5-11-09 | | | MAY 14 200 | ıú |
| /s/ JD Whitlock J | | HOBBSOCD | | |
| 14 I hereby certify that the fore | one in a top o and a most | | | |
| Name (Printed/Typed) | going is true and correct | 1 | | |
| Donna Huddleston | | Title | Production Tech | } |
| Signature / | re Hudd | Ush Date | 04/20/2009 | |
| | THIS SPACE FO | R FEDERAL OR S | TATE OFFICE I | USE |
| Approved by | | <u>بر</u> | alfulbum ew | Date MAY 18 2009 |
| Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant | al or equitable title to those ri | ghts in the subject lease | ffice | |
| minor would entitle the applicant | . to conduct operations there | OII. | | |

