

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO 1004-0135
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 reverse side.**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM14799
2. Name of Operator READ & STEVENS		6. If Indian, Allottee or Tribe Name
Contact DAVID LUNA E-Mail: dluna@read-stevens.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address P. O. BOX 1518 ROSWELL, NM 88202-1518	3b. Phone No (include area code) Ph: 575-622-3770 Ext: 213	8. Well Name and No. UNION A FEDERAL 2
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 10 T20S R34E NESW 1980FSL 1980FWL <i>Unit-K</i>		9. API Well No. 30-025-30352
		10. Field and Pool, or Exploratory LEA, DELAWARE NE
		11. County or Parish, and State LEA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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
	<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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Effective July 23, 2009 Read & Stevens, Inc. accepts responsibility of all operations on the Union A Federal #2 lease. The NMOCD approved a Change of Operator form (C-145) on this date.

Please find attached the bond coverage for Read & Stevens, Inc.

*Bond # 2310***RECEIVED****JUL 29 2009****HOBBSOC**

OK To Authorize 7-24-09
14. I hereby certify that the foregoing is true and correct.

Electronic Submission #72460 verified by the BLM Well Information System
For READ & STEVENS, sent to the Hobbs

Name (Printed/Typed) DAVID LUNA

Title ENGINEER

Signature (Electronic Submission)

Date 07/24/2009

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

PETROLEUM ENGINEER

Date

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

JUL 30 2009

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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****