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Form 3160-5

HMITED STATES

SEP 2 9 2009

FORM APPROVED

DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT							OMB No. 1004-0135 Expires January 31, 2004					
	BUREAU OF LAND MAN	IAGEMENT	5. Lease S	5. Lease Serial No.								
SUNDRY NOTICES AND REPORTS ON WELLS						NMLC-032581D						
Do not use th abandoned w	is form for proposals t ell. Use Form 3160-3 (AF	o drill or to PD) for such	re-enter an proposals.)		6. If Indian	, Allo	ttee or	Tribe N	lame		
SUBMIT IN TRIPLICATE - Other instructions on reverse side						7 If Unit or	7 If Unit or CA/Agreement, Name and/or No.					
1 1 - 1, - 1 % 1, -11						_						
□ 0 1 W e 1 ⊠ G 2 : W e 1 □ 0 th e 1							8. Well Name and No.					
2. Name of Operator /							Sholes B-19 #4					
Herman L. Loeb							9. API Well No.					
3a. Address 3b. Phone N				No. (ınclude area code)				30-025-27143				
P O Box 524, Lawrenceville, IL 62439 (618) 943						I 0. Field a	I 0. Field and Pool, or Exploratory Area					
4. Location of Well (Footage, Sec., T, R., M. or Survey Description)						Jalmat (Ta	Jalmat (Tansil, Yates, Seven Rivers)					
						I 1. County	I 1. County or Parish, State					
1980' FSI 1980' FWI Section 19-25S-R37F Unit												
1980' FSL 1980' FWL Section 19-25S-R37E						Lea Coun	ty, N	<u>M</u>				
12. CHECK AP	PROPRIATE BOX(ES) T	O INDICAT	E NATURE	(O	F NOTICE, I	REPORT, O	ROT	HER	DATA	4		
TYPE OF SUBMISSION												
	Acidize	Deepen			Production (Sta	art/Resume)		Water	Shut-Of	ff		
Notice of Intent	Alter Casing	Fracture			Reclamation	,		Well Ir	ıtegrity			
5 0 at	Casing Repair				Recomplete	Other						
Subsequent Report	Change Plans				Temporarily A							
Final Abandonment Notice	Convert to Injection	Plug Ba	_		• •							
13. Describe Proposed or Completed If the proposal is to deepen dire. Attach the Bond under which th following completion of the invo- testing has been completed. Fin determined that the site is ready 1. Set cast iron bridge plug @ 271 bridge plug. POH w/7 jts of tbg.	etionally or recomplete horizont ne work will be performed or polived operations. If the operational Abandonment Notices shall for final inspection.)	tally, give subsurevide the Bond on results in a n be filed only aft spf. RIH w/ tb	rface locations I No. on file wi cultiple completer all requirem og, tag plug, w	and th B tion ents	measured and t BLM/BIA. Requ or recompletio s, including reci	rue vertical dep pired subsequen n in a new inter lamation, have	ths of t reporval, a been o	all pertires shall Form 3 complete	inent m. I be file 160-4 s ed, and	arkers and ed within 36 shall be filed the operat	zones. 0 days d once or has	
Est inj rate of 1 bpm @ 0#. Pump	100 sk 14.8 ppg cement, dis	splace w/ 4.5 b	bl water. Rele	ase	pkr, reverse c	irc clean, POF	ł w/ tl	bg & pl	kr. 4/1:	5/09		
2. RIH w/ 30 jts of tbg, tag cemer spf. Dig cellar. Est inj rate down '											31'4	
4. Cut off the well head 4' below	ground level, cement 15' bel	ow sfc in 7" a	ad 23' below s	sfc i	n annulus. W	itnessed by Pa	ul Flo	wers.	4/21/09	9		
5. Top off 7" csg & annulus w/ 26 sk cement. 4/23/09						Accepted a	Accepted as to plugging of the well bore					
C VI att in annual at the David Elementary VI at a large on 0.5/011 and 0.5 in at 11 June 1, 12 and 11 A 10.4/04/00						Liability under bond is retained until Surface restoration is completed.						
BLM Bond # NM-2839												
14. I hereby certify that the foregoing Name (PrintedlTyped)	g is true and correct		1									
G. A. Payne				Title Petroleum Engineer								
Signature	53~		Date 9/16/	09		ACCEP	TE	DF	OR	REC()R[

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Office

SEP 3

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for a mygeingly and willfully to make to any department or agency of the United CARLSBAD FIELD UTFILE

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.

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