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Form 3160-5
(April 2004)

NOV 09 2009

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-HOBBS

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

HOBBSOCD

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.

5. Lease Serial No. LC061374A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No. Bell Lake #32

9. API Well No. 30-025-39253

10. Field and Pool, or Exploratory Area South Bell Lake Morrow

11. County or Parish, State Lea/NM

1. Type of Well Oil Well Gas Well Other

2. Name of Operator Kaiser-Francis Oil Company

3a. Address P. O. Box 21468, Tulsa, OK 74121-1468

3b. Phone No. (include area code) 918-491-4314

4. Location of Well (Footage, Sec., T, R, M., or Survey Description)
1150' FSL & 990' FWL of Sec. 5-24S-34E

12. CHECK 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 checked="" type="checkbox"/> Other Change of operator
	<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 10/1/09, Kaiser-Francis Oil Company took over operations of the above well from OXY USA, Inc.

Be advised that Kaiser-Francis Oil Company is considered to be the operator on the above-described lands and is responsible under the terms and conditions of the lease for the operations conducted on the leased lands or portions thereof. Bond coverage for this well is provided by Travelers Casualty, No. 040S103877784BCM.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Charlotte Van Valkenburg

Title Technical Coordinator

Signature

Charlotte Van Valkenburg

Date 10/28/09

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

APPROVED

Approved by

PETROLEUM ENGINEER

NOV 09 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

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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.

BUREAU OF LAND MANAGEMENT

CARLSBAD FIELD OFFICE

(Instructions on page 2)

OPERATORS

SUBMIT 1 ORIGINAL AND 3 COPIES