Form 3160-5 (February 2005)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

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

5. Lease Serial No. NM-10474

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-enter an

apandoned well. Use Form 3160-3 (APD) for such proposals.						
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agr	reement, Name and/or No.
1. Type of Well ☑ Oil Well ☐ Gas Well ☐ Other					8. Well Name and N Ling Federal No. 9	o.
2. Name of Operator Fasken Oil and Ranch, Ltd.					9. API Well No 30-025-39454	
3a. Address 303 West Wall St., Suite 1800, Midland, TX 797	3b. Phone No. (include area code) 432-687-1777			10. Field and Pool or Exploratory Area Apache Ridge; Bone Springs		
4. Location of Well (Footage, Sec., T., 790' FNL & 1980' FWL, Section 31, T19S, R34E)			11. Country or Parish, State Lea, NM		
12. CHEC	K THE APPROPRIATE BO	X(ES) TO IND	ICATE NATUR	E OF NOTIC	E, REPORT OR OT	HER DATA
TYPE OF SUBMISSION			TY	ION		
Notice of Intent	Acidize Alter Casing	Deepen Production (Start/Resum Fracture Treat Reclamation				Water Shut-Off Well Integrity
✓ Subsequent Report	Change Plans		Construction and Abandon	Temp	mplete	
Final Abandonment Notice	Convert to Injection	Plug	Back	Water	r Disposal	
testing has been completed. Final Adetermined that the site is ready for 1-12-10 - 1-15-10 RUPU. Perforated 5-1/2" casing at 9 phasing, 48 total holes. Spotted 250 clay stabilizers & 60 1.3 sg ball seals hung well on with good pump action	ed operations If the operational inspection.) 9508'- 19', 9524'- 9532', 9' gal of 15% NEFE HCL wers. RIW w/ 292- Jts 2-3/8. RDPU & cleaned location	on results in a me be filed only after the filed on	ultiple completion all requirements all	on or recomplets, including	with 3-1/8" slick cas rom 9508' – 9592' With pump and r	al, a Form 3160-4 must be filed once en completed and the operator has ing gun, 1 JSPF, 0.42" EH 120° W 2500 gals of 15% NEFE HCL w/
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Kim Tyson Title Regulatory Ana				ory Analyst		
Signature Lim Dynn Date 02/01/2010						
	THIS SPACE	FOR FEDE	RAL OR ST	ATE OFF	ICE USE	
Approved by			Title	POLEIM	ENGINEER	FEB 2 4 2010
Conditions of approval, if any, are attached that the applicant holds legal or equitable to entitle the applicant to conduct operations to	tle to those rights in the subjec		ertify	K	b	1
Title 18 U S C Section 1001 and Title 43 U fictitious or fraudulent statements or representations.				nd willfully to	make to any departme	ent or agency of the United States any false