	DEPARTMENT OF THE I BUREAU OF LAND MAN/	ES INTERIOR <sup>N.</sup> M. GIL AGEMENT P. O. BOX HOBBS. N	CONS. COM	OMB No. 1004-0135 Expires July 31, 1996 5. Lease Serial No.	
	BUREAU OF LAND MAN/ Y NOTICES AND REPC is form for proposals to ell. Use Form 3160-3 (AP)		****	NM83197           6. If Indian, Allottee or Tribe Name	
SUBMIT IN TR	IPLICATE - Other instr	uctions on reverse	side	7. If Unit or CA/Agreement, Name and/or N	
1. Type of Well	1 Other			8. Well Name and No. FARRELL FED # 12	
2. Name of Operator ORBIT ENTERPRIS	SES, INC			9. API Well No. 30-041-10460	
3a. Address		3b. Phone No. (include area code) 505–396–4914		10. Field and Pool, or Exploratory Area	
BOX 476 Lovingt 4. Location of Well (Footage, Sec.	201 NM 88260 ., T., R., M., or Survey Descriptio			Chaveroo San Andre. 11. County or Parish, State	
1980' FNL & 198	80' FEL, SEC28,			Roosevelt NM	
12. CHECK AI	PROPRIATE BOX(ES) T			REPORT, OR OTHER DATA	
TYPE OF SUBMISSION		TYPE OF ACTION			
<ul> <li>Notice of Intent</li> <li>Subsequent Report</li> <li>Final Abandonment Notice</li> </ul>	<ul> <li>Acidize</li> <li>Alter Casing</li> <li>Casing Repair</li> <li>Change Plans</li> <li>Convert to Injection</li> </ul>	<ul> <li>Deepen</li> <li>Fracture Treat</li> <li>New Construction</li> <li>Plug and Abandon</li> <li>Plug Back</li> </ul>	A Production (Standard)     Reclamation     Recomplete     Temporarily A     Water Disposa	Well Integrity Other	
	UCTION BY SWABF	DINC			
RETURN TO PROD	7/97				
RETURN TO PROD Eff. 12/19	5/97	PE	ACCEPTED FOR RECORD TER W. CHESTI AN 1 2 2 3 OF LAND MANAGE	ER	
It. Thereby certify that the forego Name (Printed/Typed) VICKY SANDERS	5/97	PE	AN 1 2 3	ER	
It. Thereby certify that the forego Name (Printed/Typed)	ping is true and correct $Sachs$	PE BUREAU C ROSWE Title VE Date De	AN 1 2 3 OF LAND MANAGE LL RESOURCE AR December 15,	ER MENT EA 1997	
14. Thereby certify that the forego Name (Printed/Typed) VICKY SANDERS Signature	ping is true and correct $Sachs$	PE BUREAU O ROSWE Title VE Date De FOR FEDERAL OR	AN 1 2 3 OF LAND MANAGE LL RESOURCE AR December 15,	ER MENT EA 1997	
I4. Thereby certify that the forego Name (Printed/Typed) VICKY SANDERS Signature	oing is true and correct Salas THIS SPACE e attached. Approval of this not val or equitable title to those rig	PE PE BUREAU C ROSWE Title VE Date De FOR FEDERAL OR S tice does not warrant or	AN 1 2 3 OF LAND MANAGE LL RESOURCE AR DECEMBER 15, STATE OFFICE US	ER MENT EA 1997 SE	