Form 3164-5     UNITED STATES     UNITED     STATES     UNITED     STATES     UNITED     STATES     UNITED     STATE     UNITED     STATE     UNITED     STATE     UNITED     UNITED     STATE     UNITED     STATE     UNITED      UNITED     UN		N. M. OIL COL	is. Commissiop	
INTERNATION FOR PEORTS ON WELLS         Do not use this form for proposals to drill or to deepen or rearity to a different reservoir.       It is is form for proposals to drill or to deepen or rearity to a different reservoir.       It is is form for proposals to drill or to deepen or rearity to a different reservoir.         I use 'APPLICATION FOR FERMIT—'' for such proposals       It full or CA. Agreement Resumance         I use 'APPLICATION FOR FERMIT—'' for such proposals       It full or CA. Agreement Resumance         I use 'APPLICATION FOR FERMIT—'' for such proposals       It full or CA. Agreement Resumance         I use of Year       It full or CA. Agreement Resumance         I dive of the diverse of the such as the diver	(June 1990) DEPART	UNITED STATES HODBS, NEW MENT OF THE INTERIOR	MEXICO S3240	Budget Bureau No. 1004-0135 Expires: March 31, 1993
SUBMIT IN TRIPLICATE       2. If Unit or CA. Agreement Designation         1. Type of Well       B. Well Name and No.         Description       B. Well Name and No.         Charles J., Kittrell       S. Address of Topping No. 1         A decare and Topping No. 1       S. Address of Topping No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Topping No. 1       S. Mark Mell No. 1         A decare and Well Process Sec. 1. R. M. or Survey Decarboox       Bluit Lissan Andrese Assoc         G60 <sup>1</sup> FNL & 660 <sup>1</sup> FEL of Section 23, TBS, R37E       Roseevelt County, NM         II. Composed Topping No. 1       Advectorement       Becompittion         More of Intere       Advectorement       Becompittion         B subsequent Report       Becompittion       New Construction         B subsequent Report       Becompittion       New Construction for the construction in the construction in the construction of toppiction decarbon and market reports of the construction in the construction in the construction in the construction of themore of	SUNDRY NOTI Do not use this form for proposals	CES AND REPORTS ON WELI to drill or to deepen or reentry to	LS a different reservoir.	NM-14012
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2. None of Operator  (Pharles J, Kittrell  Advanced Wark Market Marke				W 0 N
		· · · · · · · · · · · · · · · · · · ·		
COO CILL REPORTS & Ges Services, Inc., FO Box 755, HHIS, IM 88/241-0755 (505)393-2727  10. Feld and Rod, or Exploratory Area Bluitt San Andres Assoc FEL of Section 23, T8s, R37E  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF SUBMISSION  CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA TYPE OF SUBMISSION  TYPE OF SUBMISSION  TYPE OF SUBMISSION  TYPE OF SUBMISSION  Describe Frequent Subscription Box(s)  Describe Frequent Box(s)  Desc	Charles J. Kittrell			
	-	nc., RO Box 755, Hobbs, NM 8824		
CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA      TYPE OF SUBMISSION      TYPE OF ACTION      Notice of Inten     Abadooment     Recompletion     Hugging Back     Non- As PET Request     Non-Routine Fracturing     Consection to lightion     Non-Routine Fracturing     Non-Routine	4. Location of Well (Footage, Sec., T., R., M., or Su	rvey Description)		Bluitt San Andres Assoc 1. County or Parish, State
TYPE OF SUBMISSION       TYPE OF ACTION         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Report       <	660' FNL & 660' FEL of Sect	tion 23, T8s, R37E		Roosevelt County, NM
Asaadonnect     Asaadonet     Asaadonet     Asaadonnect     Asaadonnect     Asaadonnect	12. CHECK APPROPRIATE E	BOX(s) TO INDICATE NATURE	OF NOTICE, REPORT	· · · · · · · · · · · · · · · · · · ·
Boosepletion	TYPE OF SUBMISSION		TYPE OF ACTION	
Subsequent Report      Generations and measured and true vertical depths for all markers and zones pertinent date; including estimated date of starting any proposed work. If well is directionally depths for all markers and zones pertinent to this work.)*      The purpose of this filing is to establish the site of water disposal as NMSWD System, Inc., Magnolia Four Lakes No. 4, OCD Order Number OCD-SWD74, Section 15, T10S, R34E, Lea County, New Mexico.      (FEB 1 0 1974)      (FEB 1 0 1974)      (FEB 1 0 1974)      (FEB 2 2 193;      (FEB 2 2 193;      (FEB 2 2 193;      (FEB 10, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0, 0	Notice of Intent			Change of Plans
Final Abandonment Notice				
Altering Casing Conversion to Injection Dispose Water Completed Operations (Clearly state all perfinent details, and give perfinent dates, including estimated due of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical deptis for all markers and zones perfinent to this work.)* The purpose of this filing is to establish the site of water disposal as NMSWD System, Inc., Magnolia Four Lakes No. 4, OCD Order Number OCD-SWD74, Section 15, TIOS, R34E, Lea County, New Mexico. If I hereby oprify that the foregoing is true and poffrect Signed Julian to foregoing in true and poffrect Signed Julian to foregoing	La Subsequent Report			
13. Describe Proposed or Completed Operations (Clearly state all periment details, and give periment dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones periment to this work.)*         The purpose of this filing is to establish the site of water disposal as NMSWD System, Inc., Magnolia Four Lakes No. 4, OCD Order Number OCD-SWD74, Section 15, T10S, R34E, Lea County, New Mexico.         If. I hereby certify that the foregoing if row and coffeet         signer		Casing Repair		
13. Describe Proposed or Completed Operations (Clearly state all perinent details, and give perinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)* The purpose of this filling is to establish the site of water disposal as NMSWD System, Inc., Magnolia Four Lakes No. 4, OCD Order Number OCD-SWD74, Section 15, T10S, R34E, Lea County, New Mexico. If thereby certify that the foregoing virue and coffrect signer. <u>Humphone</u> Title <u>Agent</u> <u>Title Agent</u>	Final Abandonment Notice	Altering Casing		
Signed       Gent       Date       2/8/94         (This space for Federal or State office use)       Title       PETER R. Charles Date       Date         Approved by       Title       FEB 2 8 199.7       Date         Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department of agency of the United States any false, fictitious or fraudulent statements	<ol> <li>Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and tru</li> </ol>	state all pertinent details, and give pertinent dates, e vertical depths for all markers and zones pertine	including estimated date of starting any ent to this work.)*	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled,
The space for Federal or State office use)         Approved by	<ol> <li>Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and tru The purpose of as NMSWD Syste</li> </ol>	Altering Casing X Other <u>AS Pe</u> state all pertinent details, and give pertinent dates, se vertical depths for all markers and zones pertine this filing is to establ m, Inc., Magnolia Four La	including estimated date of starting any ent to this work.)* Lish the site of watakes No. 4, OCD Ord	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled, there disposal ler Number () (FEB 1 0 1934
Approved by Title Title Date	13. Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and tru The purpose of as NMSWD Syste OCD-SWD74, Sec	Altering Casing X Other <u>AS Per</u> state all pertinent details, and give pertinent dates, e vertical depths for all markers and zones pertine this filing is to estable m, Inc., Magnolia Four La tion 15, T10S, R34E, Lea	including estimated date of starting any ent to this work.)* Lish the site of watakes No. 4, OCD Ord	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled, there disposal ler Number () (FEB 1 0 1934
Conditions of approval, if any: FEB 2 2 193. Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department of agency of the United States any fase, fictitious or fraudulent statements	<ul> <li>13. Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and tru         The purpose of as NMSWD Syste OCD-SWD74, Sec         OCD-SWD74, Sec     </li> <li>14. I hereby certify that the foregoing is true and coffee Signed WWW WWWWWWWWWWWWWWWWWWWWWWWWWWWWWWWW</li></ul>	Altering Casing X Other <u>AS Pe</u> state all pertinent details, and give pertinent dates, e vertical depths for all markers and zones pertine this filing is to estable m, Inc., Magnolia Four La stion 15, T10S, R34E, Lea	including estimated date of starting any ent to this work.)* Lish the site of watakes No. 4, OCD Ord	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled, there disposal ler Number . (FEB 1 0 19:34 (FEB 1 0 19:34 (FEW MEX))
Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any fase, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.	<ul> <li>13. Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and true and propose of as NMSWD System OCD-SWD74, Second Control (Control of the second se</li></ul>	Altering Casing X Other <u>AS Pe</u> state all pertinent details, and give pertinent dates, we vertical depths for all markers and zones pertine this filing is to estable m, Inc., Magnolia Four Le tion 15, T10S, R34E, Lea tion 15, T10S, R34E, Lea	including estimated date of starting any ent to this work.)* Lish the site of watakes No. 4, OCD Ord	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled, atter disposal ler Number . (FEB 1 0 1934 (FEB 1 0 1934 (NEW MEXICO) Date 2/8/94
	<ul> <li>13. Describe Proposed or Completed Operations (Clearly give subsurface locations and measured and tru The purpose of as NMSWD Syste OCD-SWD74, Sec</li> <li>14. I hereby certify that the foregoing is true and coffree Signed MLM MCC</li> <li>This space for Federal or State office use) Approved by</li></ul>	Altering Casing X Other <u>AS Pe</u> state all pertinent details, and give pertinent dates, we vertical depths for all markers and zones pertine this filing is to estable m, Inc., Magnolia Four Le tion 15, T10S, R34E, Lea	including estimated date of starting any ent to this work.)* Lish the site of watakes No. 4, OCD Ord County, New Mexico County, New Mexico	Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) (proposed work. If well is directionally drilled, atter disposal ler Number . (FEB 1 0 1934 (FEB 1 0 1934 (NEW MELLIC)) Date 2/8/94

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## **GENERAL INSTRUCTIONS**

This form is designed for submitting proposals to perform certain well operations, and reports of such operations when completed, as indicated, on Federal and Indian lands pursuant to applicable Federal law and regulations, and, if approved or accepted by any State, on all lands in such State, pursuant to applicable State law and regulations. Any necessary special instructions concerning the use of this form and the number of copies to be submitted, particularly with regard to local area, or regional procedures and practices, either are shown below or will be issued by, or may be obtained from, the local Federal and/or State office.

# SPECIFIC INSTRUCTIONS

*Item* 4—If there are no applicable State requirements, locations on Federal or Indian land should be described in accordance with Federal requirements. Consult local State or Federal office for specific instructions.

Item 13—Proposals to abandon a well and subsequent reports of abandonment should include such special information as is required by local Federal and/or State offices. In addition, such proposals and reports should include reasons for the abandonment; data on any former or present productive zones, or other zones with present significant fluid contents not sealed off by cement or otherwise; depths (top and bottom) and method of placement of cement plugs; mud or other material placed below, between and above plugs; amount, size, method of parting of any casing, liner or tubing pulled and the depth to top of any left in the hole; method of closing top of well; and date well site conditioned for final inspection looking to approval of the abandonment.

## NOTICE

The Privacy Act of 1974 and the regulation in 43 CFR 2.48(d) provide that you be furnished the following information in connection with information required by this application.

AUTHORITY: 30 U.S.C. 181 et. seq., 351 et. seq., 25 U.S.C. et. seq.; 43 CFR 3160.

PRINCIPAL PURPOSE — The information is to be used to evaluate, when appropriate, approve applications, and report completion of secondary well operations, on a Federal or Indian lease.

ROUTINE USES:

- (1) Evaluate the equipment and procedures used during the proposed or completed subsequent well operations.
- (2) Request and grant approval to perform those actions covered by 43 CFR 3162.3-2(2).
- (3) Analyze future applications to drill or modify operations in light of data obtained and methods used.
- (4)(5) Information from the record and/or the record will be transferred to appropriate Federal, State, local or foreign agencies, when relevant to civil, criminal or regulatory investigations or prosecutions.

EFFECT OF NOT PROVIDING INFORMATION — Filing of this notice and report and disclosure of the information is mandatory once an oil or gas well is drilled.

The Paperwork Reduction Act of 1980 (44 U.S.C. 3501, et. seq.) requires us to inform you that:

This information is being collected in order to evaluate proposed and/or completed subsequent well operations on Federal or Indian oil and gas leases.

This information will be used to report subsequent operations once work is completed and when requested, to obtain approval for subsequent operations not previously authorized.

Response to this request is mandatory for the specific types of activities specified in 43 CFR Part 3160.

### BURDEN HOURS STATEMENT

Public reporting burden for this form is estimated to average 25 minutes per response, including the time for reviewing instructions, gathering and maintaining data, and completing and reviewing the form. Direct comments regarding the burden estimate or any other aspect of this form to U.S. Department of the Interior, Bureau of Land Management, (Alternate) Bureau Clearance Officer, (WO-771), 18 and C Streets, N.W., Washington, D.C. 20240, and the Office of Management and Budget, Paperwork Reduction Project (1004-0135), Washington, D.C. 20503.

Form 3160-	9
(January 19	89)

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đ	Certified Mail-Return Receipt Requested
σ	Hand Delivered, Received

# DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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ge	<u>1</u> of <u>1</u>	
	Identification	

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Pa

INCIDENTS OF NONCOMPLIANCE

Lease		
CA	SW609	
Unit		
PA		

Bureau of Land Management Office ROSWELL RESOURCE AR	FA OFFICE	CHARLES J KITTR	ELL		
		Address P. O. BOX 755			
Address	OSWELL NM 88202	HOBBS, NM 88248	1		
		Attention			
Telephone					
(505) 624-1790	the second second second second second	1/4 1/4 Sec.	Township		
Site Name	Well or Facility Identification TANK BATTERY	NENE 15	85		
LIGHT FEDERAL	IANK BATTERT		Meridian		
Inspector		Range 37E	NMPM		
J R HOGWOOD	WAS FOUND BY BUREAU OF LAND MANA		AT THE SITE LISTED ABOVE.		
THE FOLLOWING VIOLATION	WAS FOUND BY BUREAU OF LAND MANA		Gravity of Violation		
Date	Time (24-hour clock)	Violation			
	1000	43CFR3162.7-5(d-3)	MINOR		
93/12/16 Corrective Action To		Assessment for Noncompliance	Assessment Reference		
be Completed by	Date Corrected	Assessment for Honcompliance			
		s	43 CFR 3163.1 ( )		
20 BUSINESS DAYS		<b>"</b> 2			
CTER DIATI	TY DIAGRAM SHALL AC	CURATELY REFLECT THI	E ACTUAL CONDITIONS		
Remarks: A SITE FACILI	HALL, COMMENCING WIT	H THE HEADER CLEARLY	IDENTIFY THE		
AT THE SITE AND SH VESSELS, PIPING, M	FTERING SYSTEM, AND	PITS WHICH APPLY TO			
VESSELS, FIFING, F	AND WATER. THE DI	AGRAM SHALL-INDICAT	<u> - WHICH VALVES</u>		
		DURING THE PRODUCTION	ON OR SALES PHASE,		
		CH THE FACILITY IS	LQCATED.		
AND CLEARLY IDENT	and return to above address.				
$\sim$	la. fran	Signature Charles K	ettel Date 1-18-94		
Company Representative Title	pecalor		top of tank for		
Company Comments All U.L.	lines are Glosed	except value on	top of Tank for		
	E a wall it as	mant is making	no oil-		
produci	tion - well at pr	/	<u> </u>		
•					

### WARNING

Incidents of Noncompliance correction and reporting time frames begin upon receipt of this Notice or 7 business days after the date it is mailed, whichever is earlier. Each violation must be corrected within the prescribed time from receipt of this Notice and reported to the Bureau of Land Management office at the address shown above. Please note that you already may have been assessed for noncompliance (see amount under "Assessment for Noncompliance"). If you do not comply as noted above under "Corrective Action To Be Completed By," you may incur an additional assessment under (43 CFR 3163.1) and may also incur Civil Penalties (43 CFR 3163.2). All self-certified corrections must be postmarked no later than the next business day after the prescribed time for correction.

Section 109(d)(1) of the Federal Oil and Gas Royalty Management Act of 1982, as implemented by the applicable provisions of the operating regulations at Title 43 CFR 3163.2(f)(1), provides that any person who "knowingly or willfully" prepares, maintains, or submits false, inaccurate, or misleading reports, notices, affidavits, records, data, or other written information required by this part shall be liable for a civil penalty of up to \$25,000 per violation for each day such violation continues, not to exceed a maximum of 20 days.

## **REVIEW AND APPEAL RIGHTS**

A person contesting a violation shall request a State Director review of the Incidents of Noncompliance. This request must be filed within 20 working days of receipt of the Incidents of Noncompliance with the appropriate State Director (see 43 CFR 3165.3). The State Director review decision may be appealed to the Interior Board of Lands Appeals, 4015 Wilson Blvd., Arlington, VA 22203 (see 43 CFR 3165.4). Contact the above listed Bureau of Land Management office for further information.

Signature of Bureau of Land Manag				Date 12-20-93	Time 9:00
Number	Date	FOR OFFICE USE ONLY Assessment	Penalty		Termination
Type of Inspection:	<u> </u>		4		

**ORIGINAL (RETURN TO ISSUING OFFICE)** 

أحر			
$\mathcal{A}$			NM-066-94-JH-027
/ <u>-</u>			Number
Form 3160-9	FEDIO		Page 01
(January 1989)		D STATES	Identification
10	DEPARTMENT	OF THE INTERIOR	Lease NMNM14012
X Certified Mail-Return	BUREAU OF LAI	ND MANAGEMENT	CA
Receipt Requested	NOTICE OF CIDENT	S OF NONCOMPLIANCE	Unit
Hand Delivered, Received	NEW M		PA
by:			
Bureau of Land Management Office		Operator CHARLES J KITTR	ELL
ROSWELL RESOURCE AR	EA OFFICE	Address P. O. BOX 755	
Address		HOBBS, NM 88248	3
P.O. DRAWER 1857, F	OSWELL NM 88202		
Telephone		Attention	
(505) 624-1790		W W 000	Township
Site Name	Well or Facility Identification	14 VA Sec. NENE 23	85
FEDERAL "N"	#1	112112	Meridian
Inspector		Range 37E	NMPM
J R HOGWOOD		NAGEMENT INSPECTORS ON THE DATE AND	AT THE SITE LISTED ABOVE.
THE FOLLOWING VIOLATION	WAS FOUND BY BUREAU OF LAND MAI	NAGEMENT INSPECTORS OF THE SHE	Gravity of Violation
Date	Time (24-hour clock)	Violation	
	1 200	OIL & GAS ORDER #7	MINOR
93/12/16	1300	Assessment for Noncompliance	Assessment Reference
Corrective Action To be Completed by	Date Corrected	Assessment for Honosinghamot	
		\$	43 CFR 3163.1 ( )
20 BUSINESS DAYS	T LAND MANAGEMENT I	DOES NOT HAVE AN APPR	OVED APPLICATION
	MUD DICDOGAL STTP.	THE NAME OF THE SIT	D, AND THE THE
- LEGAL LOCATION OF	CED (INTECTION, LT)	NED PIT, UNLINED PIL,	THE PERMIT NUMBER,
DISPOSAL METHOD U	BY ONSHORE OIL AN	D GAS ORDER No. 7-III	(A).
DISPOSAL METHOD U when violation is corrected, sign this hold	e and return to above address.	$\Omega \Lambda \circ 1$	I and I in or
		Signature harles .	Kuthell Date 1-18-94
Company Representative Title	er 2701-	Signature	<del></del> ,
		V	
Company Comments			

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Arlington, VA 22203 (see 43 C	JFR 3103.43. 000				Date	Time	
Signature of Bureau of Land	Management Aut	horized Officer			12-20-93	9:25	
	0		FOR OFFICE USE C	DNLY Penalty		Termination	
Number	Date	1	A33655111611				
Type of Inspection:							



Voil trated & Sole out of soubh tank. 1.m. n.m. 066-94 J.H. 027 N.m. n.m. 14012 NOTE for oil Soles, oil will be Sold Every 5-Federal "" #1 n. E 14 N. E 14 Soc 23 - t. 5. 85 - 37 E. ten K Hor12, 10 meter . 500 61 Dump Separator Û Dump Valve Healt