OCA-Hobbs

(August 1999)  DEPARTMENT BUREAU OF LA  SUNDRY NOTICES  Do not use this form for abandoned well. Use Form  SUBMIT IN TRIPLICATE -	ED STATES TOF THE INTERIOR AND MANAGEMENT AND REPORTS C proposals to drill or m 3160-3 (APD) for Other instructions	1 2001 OCT 5	IVED  97 9 43  NO MONT.  OFFICE	ON Expire 5. Lease Seri LC058408B 6. If Indian, A	ORM APPROVED 1B NO. 1004-0135 S: November 30, 2000 ial No. Allottee or Tribe Name CA/Agreement, Name and or
1. Type of Well Oil Well X Gas Well Other  2. Name of Operator MISSION RESOURCES CORPORATION				8. Well Name JOHNS B	3
3a. Address		3b. Phone No. (include area 713-650-1025	s code)	30-025-006 10. Field and Undesignat 11. County or LEA	Pool, or Exploratory Area ed Queens
12. CHECK APPROPRIATE	BOX(ES) TO IND	ICATE NATURE OF N	OTICE, REPO	ORT, OR OT	HER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
X Notice of Intent  Subsequent Report  Final Abandonment Notice	Acidize  Alter Casing  Casing Repair  Change Plans  Convert to Injection		Reclamation Recomplete Temporarily Water Dispo	y Abandon osal	Water Shut-Off Well Entegrity  X Other REQUEST FOR EXTENSION OF TA STATUS
3. Describe Proposed or Completed Operation (clearly If the proposal is to deepen directionally or recomp Attach the Bond under which the work will be per following completion of the involved operations. I testing has been completed. Final Abandonment N determined that the final site is ready for final inspection of the involved operations of the strength of the proposed part of the proposed part of the proposed proposed part of the proposed part	lete horizontally, give su formed or provide the Bo f the operation results in Notices shall be filed only ection.)	bsurface locations and measu ond No. on file with BLM/Bl a multiple completion or reco y after all requirements, inclu No. 3 - Mission Re	A. Required support of the completion in a neading reclamation of the completion in a neading reclamation of the complete of t	tean depths of a beequent reports we interval, a Fon, have been co	requests a
				. <u>C</u>	7-3 1

I hereby certify that the foregoing is true and correct Name (Printed/Typed) Title Regulatory Coordinator Nancy K. Gatti 09/28/01 Date THIS SPACE FOR FEDERAL OR STATE OFFICE USE

TH Approved For \_\_\_\_\_ Month Period

Title

(ORIG. SGD.) JOE G. LARA

Petrolaum Engineer

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