Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

a W. Oil Cons.

FORM APPROVED
Budget Bureau No. 1004-0135
Depires: March 31, 1993

5. Lease Designation and Serial No.

Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

				20.	ROX	1900
INDV NATICES	AND	DEDODTS	ON WELLS			14 00

REPORTS ON WELLS bbs, NM 8824†
to deepen or reentry to a different reservoir.

NM-64606
6. If Indian, Allottee or Tribe Name

	ill or to deepen or reentry to a different reservoir. R PERMIT—" for such proposals	
	IN TRIPLICATE	7. If Unit or CA, Agreement Designation PROHIBITION FEDERAL UNIT
I. Type of Well Oil Well Name of Operator MARALO, INC.		8. Well Name and No. PROHIBITION FEDERAL UNIT #3 9. API Well No.
3. Address and Telephone No.		30-025-32142
P. O. BOX 832, MIDLAND, TX 79702 4. Location of Well (Footage, Sec., T., R., M., or Survey D	10. Field and Pool, or Exploratory Area BOOTLEG RIDGE (ATOKA)	
1980' FNL & 990' FEL (UL H), SEC 12,	T22S, R32E	11. County or Parish, State
2. CHECK APPROPRIATE BOX	s) TO INDICATE NATURE OF NOTICE, REPOR	RT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment Recompletion	Change of Plans New Construction
Subsequent Report	Plugging Back Casing Repair	Non-Routine Fracturing Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give 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.)*

SEE ATTACHED RECOMPLETION PROGNOSIS

or representations as to any matter within its jurisdiction.

4. I hereby eartify that the foregoing is true and correct Signed Stalley Chan		Tide REGULATORY ANALYST		Date JULY 17, 1998		
(This space for Federal or State office use)	Title	PETROLEUM ENGINEER		JUL 2 1 1990		
Approved by (ORIG SGD.) ALEXISC, SWOBODA Conditions of approval, if any:	1100			. .		