14. I hereby certify that the signed	the foregoing is the and correct	ride <u>Petroluem Engineer</u> PETROLEUM ENGIN	Date October 3, 2001
RECEN	CUN UL		OV NOT
			OV NOT
			OV NOT
			Contraction of the second seco
	1		10
			N 9101172737275151
1	NICO.		
All gas produ- and rolling 1	iced on the lease is used o iges in production tanks.	on the lease as fuel for g	as engines, speration vessels,
give subsurface lo No commerical	gas line was ever laid to	this federal lease.	
13. Describe Proposed or C	Completed Operations (Clearly state all pertinent detail	s, and give pertinent dates, including estimated date of	Completion or Recompletion Report and Log form.) f starting any proposed work. If well is directionally drilled,
Final A	Abandonment Notice	Altering Casing	Conversion to Injection O D Dispose Water (Note: Report results of multiple completion on Well
Subsequ	uent Report	Recompletion Plugging Back Casing Repair	Non-Routine Fracturing Water Shut-Off
	of Intent	Abandonment	Change of Plans
	APPROPRIATE BOX(s) TO IND	ICATE NATURE OF NOTICE, RE TYPE OF ACT	
			Lea County, New Mexico
	- T22S - R38E		11. County or Parish, State
0 Box 1969	y; Eunice, New Mexico 882 ge, Sec., T., R., M., or Survey Description)	31 505 393-	2150 10. Field and Pool, or Exploratory Area S. Brunson Drinkard-Abo
•	duction Company		9. API Well No.
Type of Well Oil Gas Well Well Name of Operator	Other		8. Well Name and No. Sims Federal 1, 2, 3
	SUBMIT IN TRIPLI	CATE	
Do not use this fo U	SUNDRY NOTICES AND REPO orm for proposals to drill or to dee Use "APPLICATION FOR PERMIT-	pen or reentry to a different reserve	
	BUREAU OF LAND MAN		M 88240 (Consignation and Serial No. NM029029B 6. If Indian, Allottee or Tribe Name
			rench Budget Bureau No. 1004-0135 Expires: March 31, 1993

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orm 3160-5 June 1990)	UNITED STATES DEPARTMENT OF THE I BUREAU OF LAND MANA	NTERIOR	1625 N. Fre	ns. Division FORM APPROVED nch Deliget Bureau No. 1004–0135 Expires: March 31, 1993 B221 Cesignation and Serial No.
S Do not use this form Use	NM029029B 6. If Indian, Allottee or Tribe Name			
	7. If Unit or CA, Agreement Designation			
1. Type of Well Oil Gas Well Well	Other	<u> </u>		8. Well Name and No.
Oil Gas Well [2. Name of Operator	Sims Federal 1, 2, 3			
Pierce Productio	n Company			9. API Well No.
3. Address and Telephone No. P 0. Box 1969:	Eunice, New Mexico 882	31	505 394-2150	10. Field and Pool, or Exploratory Area
4. Location of Well (Footage,	S. Brunson Drinkard Abo			
	Section 7 - T22S - R38E			11. County or Parish, State
NE4	Section $7 = 1225 = Kjol$			Lea County, New Mexico
12. CHECK A	PROPRIATE BOX(s) TO INDI	CATE NATURE	OF NOTICE, REPO	
TYPE OF SU		<u></u>	TYPE OF ACTION	
		Abandonment	· · · · · · · · · · · · · · · · · · ·	Change of Plans
		Recompletion		New Construction
Subsequent	Report	Plugging Back		Non-Routine Fracturing
		Casing Repair		Water Shut-Off
Final Aban	donment Notice	Altering Casing		Conversion to Injection Dispose Water
		1 Orber		Dispose Water
13. Describe Proposed or Comp give subsurface location	leted Operations (Clearly state all pertinent details, ns and measured and true vertical depths for all	, and give pertinent dates, markers and zones pertin	including estimated date of start ent to this work.)*	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)
give subsurface location Request produced	ns and measured and true vertical depths for all	, and give pertinent dates, markers and zones pertin	including estimated date of start ent to this work.)*	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled,
give subsurface locatio	ns and measured and true vertical depths for all	, and give pertinent dates, markers and zones pertin	including estimated date of start ent to this work.)*	(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled,
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give subsurface location	ns and measured and true vertical depths for an	APPROVAL SU		(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled
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give subsurface location Request produced See attached she See attached she	his and measured and true vertical depths for an events.	and give pertinent dates, markers and zones pertin APPROVAL SU GENERAL REC SPECIAL STIP	JBJECT TO QUIREMENTS ANI ULATIONS ATTA((Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled
give subsurface location Request produced See attached she See attached she	bregoing is true TPI correct	and give pertinent dates, markers and zones pertin APPROVAL SU GENERAL REC SPECIAL STIP	JBJECT TO QUIREMENTS AND ULATIONS ATTA	Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.) ing any proposed work. If well is directionally drilled, 00 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1

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