

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Conservation Division, District 1
1625 N. French Ave
Hobbs, NM 88240
OMB No. 1004-0135
Expires November 30, 2000

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well
☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator
Harvard Petroleum Corporation

3a. Address
PO Box 936, Roswell, NM 88201-0936

3b. Phone No. (include area code)
505-623-1581

4. Location of Well (Footage, Sec., T, R., M., or Survey Description)
1980' FSL & 2308' FEL, Sec 29-T23S-R32E

5. Lease Serial No.
NM-0559539

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
James Federal #4

9. API Well No.
30-025-35843

10. Field and Pool, or Exploratory Area
Triste Draw, West (Delaware)

11. County or Parish, State
Lea Co., NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Intermediate and production casing report
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

3. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

5/9/02 TD - 4600' Circ 1 hr, TOH, LD large DC, RU csg crew and run 103 jts (4601') of new 8 5/8" 32# J55 csg w/ guide shoe, float collar and 6 centralizers. RU BJ Services, cmt w/ 1300 sx 35/65 Poz "C" w/ 6% gel and 1/4# celloflake lead and 200 sx class "C" w/ 1% CaCl, displace w/ 277 bbls FW, bumped plug at 10:15 pm w/ 500#, circ 180 sx to pit.

5/17/02 TD - 8632', Circ 1 hr, LD DP, RU csg crew and run 8638.17' (257 jts) of 5 1/2" 17# N80 and J55 csg, ran centralizers on 1st five joints then every hird jt to above the DV tool. RD csg crew, RU BJ Services, circ well 30 min, Start pumping 1st stage: 20 bbl FW spacer, 300 sx 15-61# (Poz-C-CSE) + 1/4 pps cello flake, .5% FL-25, .5% FL-52, 5 pps gilsonite, displace plug w/ 199 bbls, plug dwn at 10 am 5/17, plug held, drop bomb, open DV tool w/ 300 psi, circ cmt off DV tool for 4 1/2 hrs. Start pumping 2nd stage: introduce 150 SCF N2 in 150 bbls drlg fluid, 420 sx 35-65# (Poz-C-Gel) lead + 1/4 pps cello flake, and 150 sx Class C tail, displace w/ 160 bbls. Bumped plug at 3 pm w/ 2900 psi, plug held.

5/28 - RU wireline, run CBL, good bond, cmt top at 2000'.

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) Jeff Harvard

Title President

Signature [Signature]

Date 6/11/02

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by (Signature) _____

Name (Printed/Typed) _____

Title _____

Office _____

Date _____

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.

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.