Form 3160-5 (June 1980)       UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT       HoLbs, NM L41         SUNDRY NOTICES AND REPORTS ON WELLS       Budget and Serial N SUNDRY NOTICES AND REPORTS ON WELLS       5. Less Designation and Serial N NMLC 030187         Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals       7. If Unit or CA, Agreement Design SUBMIT IN TRIPLICATE         1. Type of Well Well       Gas Well       0. If Indian, Allottee or Tribe Name         2. Name of Operator       9. API Well No. 30-025-10856       8. Well Name and No. C. E. Lamunyon #12         3. Address and Telephone No. 10 Desta Drive, Suite 420E       Midland, Texas 79705       (915) 685-1961       10. Field and Pool, or Exploratory. 30-025-10856         10 Desta Drive, Suite 420E       Midland, Texas 79705       (915) 685-1961       10. Field and Pool, or Exploratory. 30-025-10856         11 County or Parish, State Lea County, NM       12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       New Construction New Construction         12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       Non-Routine Fracturing New Construction         12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA       Non-Routine Fracturing New Constructi		;	n.	N.M. OH OT	ń F		
SUNDRY NOTICES AND REPORTS ON WELLS       NMLC 030187         Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals       8. If Indian, Allottee or Tribe Name         SUBMIT IN TRIPLICATE       7. If Unit or CA, Agreement Design         1. Type of Well       8. Well Name and No.         Oil       Gas         Well       0. If Unit or CA, Agreement Design         7. If Unit or CA, Agreement Design         7. Jet Unit or CA, Agreement Design         7. Jet Unit or CA, Agreement Design         8. Well Name and No.         C. E. Lammunyon #12         9. API Well No.         3. Address and Telephone No.         10 Desta Drive, Suite 420E         Mildiand, Texas 79705         (915) 685-1961         10. Field and Pool, or Exploratory.         11. County or Parish, State         Location of Well (Footage, Sec., T., R., M., or Survey Description)         Unit E, 1980' FNL and 660' FWL, Sec. 27, T23S, R37E         11. County or Parish, State         Lea County, NM         12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Subsequent Report       Plouging Back       Now Construction <t< td=""><td>Form 3160-5 (June 1990)</td><td colspan="2">DEPARTMENT OF THE INTERIOR</td><td>P.O. Box 1931 Holbs, NM c41</td><td colspan="2">FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993</td></t<>	Form 3160-5 (June 1990)	DEPARTMENT OF THE INTERIOR		P.O. Box 1931 Holbs, NM c41	FORM APPROVED Budget Bureau No. 1004-0135 Expires: March 31, 1993		
Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. Use "APPLICATION FOR PERMIT-" for such proposals <ul> <li>APPLICATION FOR PERMIT-" for such proposals</li> <li>SUBMIT IN TRIPLICATE</li> <li>T. If Unit or CA, Agreement Design</li> <li>Weil</li></ul>					5. Lease Designation and Serial No. NMLC 030187		
SUBMIT IN TRIPLICATE         1. Type of Well       Gas         Oll       Well         Well       Other         2. Name of Operator       9. API Well No.         3. Address and Telephone No.       9. API Well No.         10 Desta Drive, Suite 420E       Midland, Texas 79705       (915) 685-1961         10 Location of Well (Footage, Sec., T., R., M., or Survey Description)       Teague Devonian         Unit E, 1980' FNL and 660' FWL, Sec. 27, T23S, R37E       11. County or Parish, State         Lea County, NM       12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Image: Another and the state of the s	Do not use this form f	6. If Indian, Allottee or Tribe Name					
Normal Content       8. Well Name and No.         2. Name of Operator       0. Kernel Content         Arch Petroleum Inc.       9. API Well No.         3. Address and Telephone No.       30-025-10856         10 Desta Drive, Suite 420E       Midland, Texas 79705         4. Location of Well (Footage, Sec., T., R., M., or Survey Description)       Teague Devonian         Unit E, 1980' FNL and 660' FWL, Sec. 27, T23S, R37E       11. County or Parish, State         Lea County, NM       12.       CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA         TYPE OF SUBMISSION       TYPE OF ACTION         Motice of Intent       Abandonment         Subsequent Report       Plugging Back         Vater Splur       Other Temporarily Abandon         Isong Repair       Other Temporarily Abandon         13. Describe Proposed or Completed Operations (Clearly state all perinet details, and give pertinent dates, including estimated date of starting any proposed work. If well		7. If Unit or CA, Agreement Designation					
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TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Abandonment       Change of Plans         Subsequent Report       Recompletion       New Construction         Subsequent Report       Plugging Back       Non-Routine Fracturing         Final Abandonment Notice       Altering Casing       Conversion to Injection         r       Other Temporarily Abandon       Dispose Water         INote: Report results of multiple completion on to Completed Operations (Clearly state all pertinet details, and give pertinent dates, including estimated date of starting any proposed work. If well	Unit E, 1980' FNL and 66						
Image: Notice of Intent       Abandonment       Change of Plans         Image: Notice of Intent       Recompletion       New Construction         Image: Subsequent Report       Plugging Back       Non-Routine Fracturing         Image: Subsequent Report       Plugging Back       Non-Routine Fracturing         Image: Subsequent Report       Plugging Back       Non-Routine Fracturing         Image: Subsequent Report       Altering Casing       Conversion to Injection         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         Image: Subsequent Report       Image: Subsequent Report       Image: Subsequent Report         Image: Subsequent Repor	12. CHECK APP	ROPRIATE BOX(s) T	O INDICATE NATUR	E OF NOTICE, REPORT, C	R OTHER DATA		
Image: Subsequent Report       Image: Recompletion       Image: New Construction         Image: Subsequent Report       Image: Plugging Back       Image: Non-Routine Fracturing         Image: Subsequent Report       Image: Plugging Back       Image: New Construction         Image: Subsequent Report       Image: Plugging Back       Image: New Construction         Image: Subsequent Report       Image: Plugging Back       Image: New Construction         Image: Subsequent Report       Image: Plugging Back       Image: New Construction         Image: Subsequent Report       Image: Plugging Back       Image: New Construction         Image: Subsequent Report       Image: Altering Casing       Image: Plugging Back         Image: Subsequent Notice       Image: Altering Casing       Image: Conversion to Injection         Image: Proposed or Completed Operations (Clearly state all pertinet details, and give pertinent dates, including estimated date of starting any proposed work. If well         13. Describe Proposed or Completed Operations (Clearly state all pertinet details, and give pertinent dates, including estimated date of starting any proposed work. If well	TYPE OF SU	TYPE OF SUBMISSION TYPE OF ACTION					
Casing Repair     Casing Repair     Casing Repair     Casing Repair     Water Shut-Off     Conversion to Injection     Altering Casing     Other Temporarily Abandon     Dispose Water     (Note: Report results of multiple completion on to Completion or Recompletion	Notice of Inte	nt					
Other <u>Temporarily Abandon</u> Dispose Water     (Note: Report results of multiple completion or Necompletion or Recompletion or Recompletion Report and Log for	Subsequent F	Report					
13. Describe Proposed or Completed Operations (Clearly state all pertinet details, and give pertinent dates, including estimated date of starting any proposed work. If well directionally drilled, give subsurface locations and measured and true vertical depths for all markders and zones pertinent to this work.)*	Final Abando	nment Notice		-			
CIBP set @ 6336' It is proposed to:	directionally drilled, give sub CIBP set @ 6336'	leted Operations (Clearly state surface locations and measured	all pertinet details, and give pe I and true vertical depths for a	ertinent dates, including estimated date Il markders and zones pertinent to this v	of starting any proposed work. If well is vork.)*		

1) Pressure test CIBP to 500 PSI for 30 minutes.

2) Record results on chart to be filed with subsequent report.

3) Temporarily Abandon wellbore for future use.

	14. I hereby certify that the foregoing is true and correct Signed <u>March S. M. Calley</u>		Title Production Tech.		04/08/99			
	This space for Federal or State office use) pproved by ORIG. SGD.) DAVID R. GLASS conditions of approval, if any:		PETROLEUM ENGINEER	Date	APR 1 5 1999			
G	SEE ATTACHED FOR							
Ŵ	Title 18 U.S.C. Scotter toot, in the Marine Man Dan Department of agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.							
1	*See Instruction on Reverse Side							