Form 3160-5

UNITED STATES

OPERATOR'S COPY

FORM APPROVED Budget Bureau No. 1004-0135

ARTMENT OF THE INTERIOR	Expires: March 31, 1993	
BUREAU OF LAND MANAGEMENT		
sals to drill or to deepen or reentry to a different reserv	8910082510 Fee 6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE		
1. Type of Well Oil Gas Well Xother Injection Well 2. Name of Operator Betwell Oil & Gas Company 3. Address and Telephone No. PO Box 2577, Hialeah, FL 33012; 915-620-6042		
TE BOX(s) TO INDICATE NATURE OF NOTICE, RE	PORT, OR OTHER DATA	
TYPE OF ACT	rion	
Abandonment Recompletion Plugging Back Casing Repair Altering Casing Other	Change of Plans New Construction Non-Routine Fracturing Water Shut-Off Conversion to Injection Dispose Water (Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	
	CAU OF LAND MANAGEMENT OTICES AND REPORTS ON WELLS sals to drill or to deepen or reentry to a different resent of the second o	

- give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)
 - Run in hole; set Bridge Plug above perfs;
 - Isolate casing leak; squeeze cement to circulate to surface if possible;
 - Drill out and test.

I hereby certify that the foregoing is true and correct				
Signed Amda Signed	Title Agent		Date4/17/01	
(This space for Federal or State office use)	Title	ORIOW Company	Date	
Approved by	Hue	Filling		