Form ³160-5 (!une 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR

N.N DII Co P.O. Box 198 Hobbs, NM

FORM APPROVED
Budget Bureau No. 1004-0135

DELTACIME	TAND MANAGEMENT		Expires: March 31, 1993		
BUREAU OF	LAND MANAGEMENT	RECEIVE	5. Lease Designation and Serial No NMLC032581B		
Do not use this form for proposals to o	S AND REPORTS ON WEL drill or to deepen or reentry to OR PERMIT—" for such prope	a different reserver.	6. If Indian, Allottee or Tribe Name 5: 09		
SUBMI	IT IN TRIPLICATE	BUREAU OF LAND HOBBS, NEW ME)	TOM Phit or CA, Agreement Designation		
I. Type of Well Oil X Gas Well X Well Other			8. Well Name and No. Sholes B-19 #1		
2. Name of Operator Midland Operating, Inc.		(915)570-00			
3. Address and Telephone No. 3300 N. 'A' Street; Bldg. Tv	10. Field and Pool, or Exploratory Area Jalmat/Tnsl-Yts-7R (pro				
4. Location of Well (Footage, Sec., T., R., M., or Survey Unit N, 660 FSL & 1980 FWL;	11. County or Parish, State				
			Lea Co., NM		
CHECK APPROPRIATE BOX	CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPOR				
TYPE OF SUBMISSION		TYPE OF ACTION			
Notice of Intent	Abandonment		Change of Plans New Construction		
Subsequent Report	Recompletion Plugging Back Casing Repair		Non-Routine Fracturing Water Shut-Off		
Final Abandonment Notice	Altering Casin		Conversion to Injection Dispose Water (Note, Report results of multiple completion on Well Completion or Recompletion Report and Cog form)		
13. Describe Proposed or Completed Operations (Clearly star give subsurface locations and measured and true vi We are currently reviewi TA status for one year.	ertical depths for all markers and zones pert	inent to this work.)*			
14. Therety certify that the foreyoung is the age settle.	Operation	ns Engineer	3/31/99		

	Signed MUCKELL D. Tombresof	Title	Operations Engineer		Date	3/31/9	1	
	This space to Federal or State office use:							
	Approved by	Title			1.1.1			
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4.4	tile 18 U.S.C. Section 1904, maker the classic land as a second month ones, certificentially as to any matter within the second to the	and with	The state of any department of agen	manuscript of the second of th				V