

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
Budget Bureau No. 1004-0135  
Expires: March 31, 1993

**SUNDRY NOTICES AND REPORTS ON WELLS**

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

**SUBMIT IN TRIPLICATE**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. <b>LC 034117 A</b>
2. Name of Operator <b>Midland Operating, Inc.</b>	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. <b>3300 North "A", 2-104, Midland, Texas 79705, 915-570-0077</b>	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>660' FSL &amp; 1980' FEL, Sec 29, T25S, R37E, Unit 0</b>	8. Well Name and No. <b>R.S. Crosby "A"</b>
	9. API Well No. <b>#1</b>
	10. Field and Pool, or Exploratory Area <b>Jalmat Yates</b>
	11. County or Parish, State <b>Lea County, NM</b>

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
* Request for TA Status	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Other
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)

Midland Operating, Inc. request that this well be reclassified Temporarily Abandoned. This well is awaiting new artificial lift equipment. The expected date of this work is July 2000.

TH Approved *6*  
Ending *2/27/2000*

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14. I hereby certify that the foregoing is true and correct	
Signed <i>[Signature]</i>	Title <b>President</b>
(This space for Federal or State office use)	Date <b>1-9-00</b>
Approved by <i>[Signature]</i>	Title <i>[Signature]</i>
Conditions of approval, if any	Date <b>1/27/2000</b>

Title 18 U.S.C. Section 1001, makes 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.