

Form 3160-5
(June 2019)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2021**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.5. Lease Serial No.
NMNM06766

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other2. Name of Operator
Southwest Royalties, Inc.3a. Address P.O. Box 53570
Midland, Texas 797103b. Phone No. (include area code)
(432) 207-3054

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

8. Well Name and No.
North Hackberry Yates Unit #1059. API Well No.
30-015-0461810. Field and Pool or Exploratory Area
North Hackberry Yates4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
H, 2310' FNL & 990' FEL, Sec 23, T-19S, R-30E11. Country or Parish, State
Eddy County, New Mexico

12. CHECK THE 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"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input checked="" 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 type="checkbox"/> Other
	<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	

13. 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has detennined that the site is ready for final inspection.)

04/27-29/2020: MIRU WSU. BLEED WELL DOWN WITH VACUUM TRUCK. REPAIR WELLHEAD. UNSEAT PACKER AND NU BOP. POH WITH 57 JTS OF 2-3/8" TBG AND AD-1 PACKER. REPLACED 1 JT. MULTIPLE COLLARS THAT WERE LEAKING AND ALL O-RING SEALS. RIH WITH 57 JTS OF 2-3/8" TBG AND AD-1 PACKER. RU PUMP TRUCK AND CIRCULATE PACKER FLUID. SET PACKER AT 1715'. RU PUMP TRUCK AND PERFORM MIT PRESSURE TEST WITH CHART RECORDER. PRESSURE TEST GOOD. RD WSU.

** CHART ATTACHED FOR RECORD **

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Lindsay Livesay

Regulatory Analyst

Title

Signature

Date

05/05/2020

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

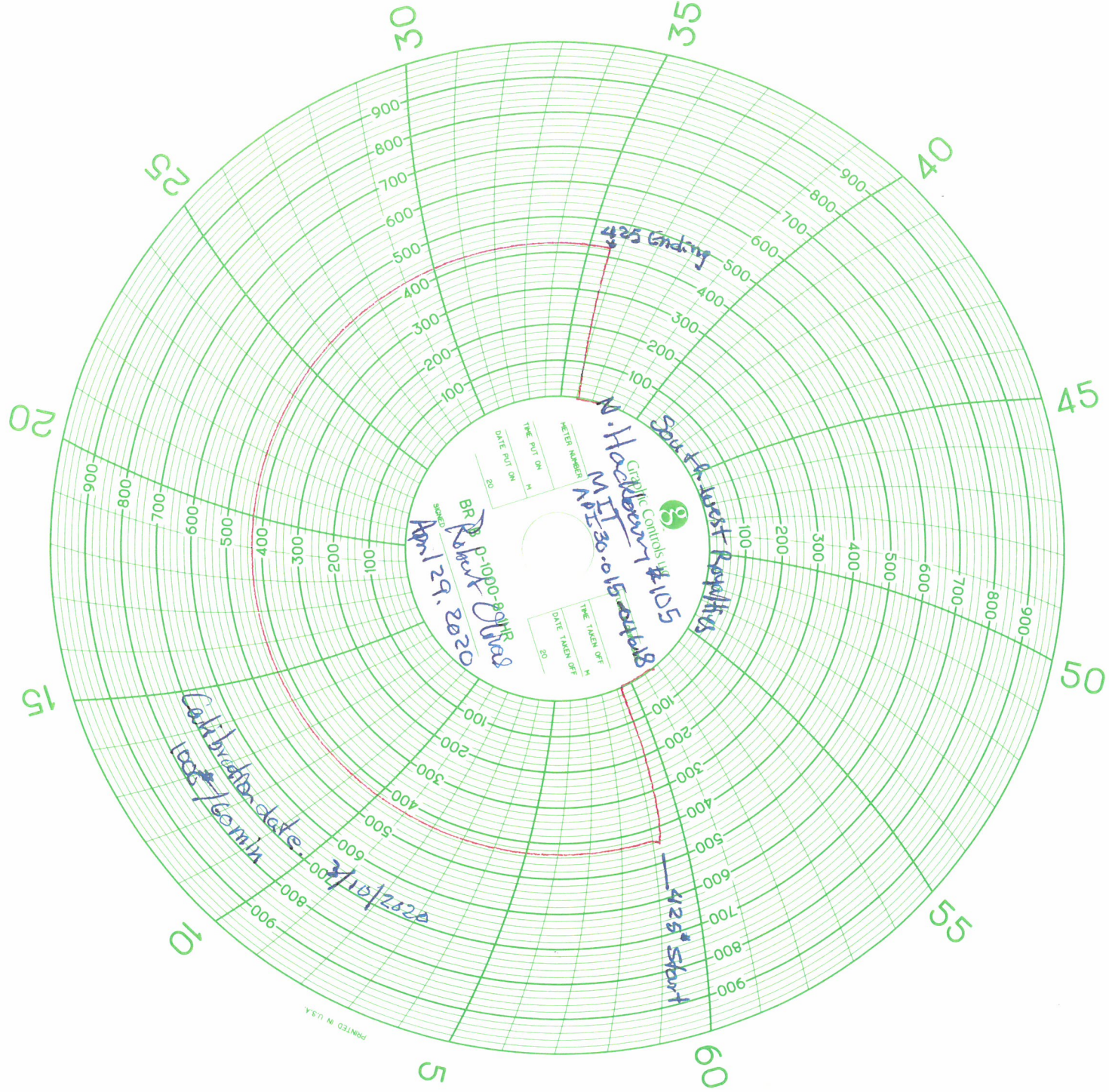
Date

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.

Office

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.

(Instructions on page 2)



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Grip Controls #105

N. H. Haddad
N.I. 30-015-01018

METER NUMBER
TIME PUT ON
DATE PUT ON

TIME TAKEN OFF
DATE TAKEN OFF