| Form 3160-5 (September 2001) | UNITED STATES IN OIL CONSERVATIO DEPARTMENT OF THE INTERIOR ADESTA DISTRICT BUREAU OF LAND MANAGEMENT | | | | FORM APPROVED OM B No. 1004-0135 Expires: January 31, 2004 5. Lease Serial No. | | | | | | |
|--|---|---|--|---|--|--|--|--|--|----------------------|---|
| SUNDRY NOTICES AND REPORTS ON WELLS 2015 | | | | NMLC060476 | | | | | | | |
| Do not use t | his form for proposals i vell. Use Form 3160-3 (| to drill or to re- | enter an | 6. If Indian | , Allottee or Tribe Name | | | | | | |
| SUBMIT IN TRIPLICATE- Other instructions on reverse side. 1. Type of Well Gas Well Other 2. Name of Operator Memorial Production Operating LLC | | | | If Unit or CA/Agreement, Name and/or No. NMNM101360X Well Name and No. NORTH SQUARE LAKE UNIT #066 | | | | | | | |
| | | | | | | 3a Address 3b. Phone No. (include area code) | | | | 9. API We 30-015- | |
| | | | | | | 3a Address 30. Fn0ie 1 1301 McKinney Street; Suite 2100, Houston, Texas 77010 713-588- | | | | | 10. Field and Pool, or Exploratory Area |
| 4. Location of Well (Footage, Sec., T., R. M., or Survey Description) | | | | Square Lake; Grayburg-San Andres 11. County or Parish, State | | | | | | | |
| SEC 27 T16S R31E 1650' FSL & 990' FWL | | | | | COUNTY, NEW MEXICO | | | | | | |
| 12. CHECK A | PPROPRIATE BOX(ES) TO | INDICATE NATU | RE OF NOTICE, RI | EPORT, OR | OTHER DATA | | | | | | |
| TYPE OF SUBMISSION | TYPE OF ACTION | | | | | | | | | | |
| | Acidize | Deepen | Production (Star | t/Resume) | Water Shut-Off | | | | | | |
| Notice of Intent | Alter Casing | Fracture Treat | Reclamation | | Well Integrity | | | | | | |
| Subsequent Report | Casing Repair | New Construction | Recomplete | | Other Operator Name Change | | | | | | |
| Final Abandonment Notice | Convert to Injection | Plug and Abandon Plug Back | | | | | | | | | |
| Production Operating LL a result of the merger of l the properties owned pre | nereby notify and reflect, effect C ("Memorial"). A copy of th Boaz and Memorial, Memorial | e Certificate of Merg owns one hundred p conducted by Memor | er is enclosed and has ercent (100%) of the re al shall be covered unc | been recorde ecord, benefi ler Statewide | d in each applicable county. As cial and equitable title in and to BLM Bond NMB00113 | | | | | | |
| 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Larry Forney Signature | | Title Date | Title Vice President and Chief Operating Officer Date 3/14 | | | | | | | | |
| | THIS SPACE FOR | FEDERAL OR | STATE OFFICE | USE | | | | | | | |
| Approved by | inch legrete |) | Title PAT | - D | rate 2/23/2015 | | | | | | |
| Conditions of approval, if any, are a certify that the applicant holds lega which would entitle the applicant to | l or equitable title to those rights in | | Office | Ð | | | | | | | |
| Title 18 U.S.C. Section 1001 and Title | | crime for any person l | nowingly and willfully to | make to any | department or agency of the United | | | | | | |

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(Instructions on page 2)