

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Artesia

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010**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.***SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC058127
2. Name of Operator Thompson, J. Cleo		6. If Indian, Allottee or Tribe Name
3a. Address 325 N. Saint Paul, Ste 4300 Dallas, TX 75201	3b. Phone No. (include area code) 432-550-8887	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 17, T18S, R29E, NMP 330' FNL & 330' FEL		8. Well Name and No. Travis R #1
		9. API Well No. 30-015-03432
		10. Field and Pool, or Exploratory Area Loco Hills
		11. County or Parish, State Eddy Co, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input 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 checked="" 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 recompleate 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

08/11/17 MIRU Plugging equipment. 08/14/17 POH w/ 94 5/8" rods, 1 3/4" rods, & pump. DUG out cellar, ND well head, NU BOP. POH w/ 80 jts 2 3/8 tbg. RIH & tagged out @ 1824'. Worked tbg to 2249'. Spotted 25 sx class C cmt @ 2249-2100'. WOC. 08/15/17 Tagged plug @ 2184'. Circulated hole w/ mud laden fluid. Perf'd csg @ 1460'. Pressured up on perfs. Spotted 25 sx class C cmt w/ 2% CACL @ 1510-1360'. WOC. Tagged plug @ 1337'. Perf'd csg @ 795'. Pressured up on perfs to 500 psi. Spotted 25 sx class C cmt @ 845-695'. WOC. 08/16/17 Tagged plug @ 749'. Perf'd csg @ 396'. Sqz'd 45 sx class C cmt w/ 2% CACL @ 396' & displaced to 280'. WOC. Tagged plug @ 270'. Perf'd csg @ 100'. Sqz'd 60 sx class C cmt @ 100' & circulated to surface. Rigged down and moved off. 08/17/17 Moved in backhoe and welder. Dug out cellar. Cut off well head. Welded on "Above Ground Dry Hole Marker". Backfilled cellar. Cut off deadmen. Cleaned location, moved off.

P:Ad 8/17/17

NM OIL CONSERVATION
ARTESIA DISTRICT

OCT 20 2017

Plug 1; was to be from 2585-2250
Actual. Set from 2249-2184, Equals 65'.
Not to plan. PET insp. shows 2585-2184.

RECLAMATION
DUE 2-17-18BC 10-20-17
Accepted for record - NMOCD

14. I hereby certify that the foregoing is a true and correct copy of the original as submitted to me.	
Name (Printed Type) Shelly Bilberry	Title Regulatory Specialist
Signature <i>Shelly Bilberry</i>	Date 8/22/17
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved by <i>James R. [Signature]</i>	Title SPE T
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.	Date 10-6-17
Office CFO	
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.	