Form 3160-5 (February 2005)

OCD-ARTESIA

UNITED STATES DEPARTMENT OF THE INTERIOR

SUNDRY NOTICES AND REPORTS ON WELLS

BUREAU OF LAND MANAGEMENT

FORM APPROVED OM B No 1004-0137 Expires: March 31, 2007

5. Lease Serial No. LC-028936-C

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.				6. If Indi	an, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				7 If Unit	or CA/Agreement, Name and/or No.	
Type of Well Oil Well□ □ Gas Well□□ Other				8. Well N	Name and No.	
2. Name of Operator Alamo Permian Resources, LLC				ł	Federal S #6	
				9. API V	Well No. 1 5-20147	
3a. Address 415 W. Wall Street, Suite 500, Midland, TX 79701 3b. Phone No. (include area code) 432.897.0673					and Pool, or Exploratory Area	
4 Location of Well (Footage, Sec., T., R., M., or Survey Description)				Gray	burg-Jackson	
K: 1980 FSL, 1980 FWL Sec 28-T17S-R29E				ļ	ty or Parish, State County, NM	
12. CHECK AI	PROPRIATE BOX(ES)	TO INDICATE NA	TURE OF NOTICE	, REPORT, C	OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION				I		
Notice of Intent Subsequent Report	✓ Acıdize ☐ Alter Casıng ☐ Casing Repair	Deepen Fracture Treat New Construct	Reclamatio		tart/Resume) Water Shut-Off Well Integrity Other Reperforate existing	
· ·	Change Plans	Plug and Aband	ion Temporani	y Abandon	perforations and	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disp	oosal	perf new intervals	
following completion of the involved operations. If the operation results in a multiple completion or recompletion testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclar determined that the site is ready for final inspection.) Existing perforations at 2,878'-2,882', 3,001'-3,005', 3,030'-3,036', & 3,111'-3,121' 1. Pull out of hole with rods, pump and tubing 2. Re-perforate existing perforations (2 spf) 3. Perforate new intervals: 2,868'-2,874', 3,072'-3,074', & 3,132'-3,138' (2 spf) 4. Acidize all perforations with ±3,500 gal 15% HCl acid (75 gal/ft) 5. Flow back well and clean up						
6. Run in hole with tubing, rods and pump 7. Restore well to production and test					NMOCD ARTESIA	
Reject	d- 191	amo s	5 hor		prator	
		0+		COPOL	nom 9/29/10	
14. Thereby certify that the fore Name (Printed/Typed) Joanne Keating	going is true and correct	Titl	e Regulatory Affair	rs Coordinator		
Signature Jane	Kest	Da	te	09/21/2010		
	THIS SPACE FO	R FEDERAL OI	R STATE OFFI	CE USE		
Approved by			Title		Date	
Approved by Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject lear which would entitle the applicant to conduct operations thereon.			Office		Late	
	43 USC Section 1212, make	it a crime for any persons as to any matter with	on knowingly and will nin its jurisdiction	fully to make to	any department or agency of the United	

(Instructions on page 2)





