Form 3160- 5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM	4 ΔΙ	PROV	ED
OMB	No.	1004-0	137
Expiree.	Oct	ober 31	20

Lease Serial No.

CI	17	Λ	70	7	13

SUNDRY NOTICES AND REPORTS ON WELLS				6. If Indian, Allot	6. If Indian, Allottee, or Tribe Name		
Do not use this form for proposals to drill or to re-enter an					er e		
aban	doned well. Use Form 3160-3	(APD) for such pi	oposals.	<u> </u>			
SUBMIT IN TRIPLICATE - Other Instructions on page 2.				7. If Unit or CA//	Agreement Name and/or No.		
	Trail Elocite Out of motor						
Type of Well Oil Well	X Gas Well Off	L		8. Well Name and	I Nico		
U Oil Well	A Gas well Ut	ner		a. Wen Name and	Arnstein #1Y		
2. Name of Operator				9. API Well No.			
EnerVest Operating, L.L.C.				30-045-31218			
3a. Address			(include area code)	10. Field and Pool, or Exploratory Area			
1001 Fannin St. Suite 800, Hou 4. Location of Well (Footage, Sec., T.,		713-659-35	00	Blanco Mesaverde/Basin Dakota V 11. County or Parish, State			
4. Location of Well (Poolage, Sec., 1 660' FNL & 1315' FWL (UL C	,	•		San Juan, NM			
	PRIATE BOX(ES) TO INDICA	ATE NATURE OF	NOTICE, REPORT, OF	OTHER DATA			
TYPE OF SUBMISSION			TYPE OF ACTION	COLLEGIO			
	 						
X Notice of Intent	Acidize	Deepen	Production (Start/ Resume)	Water Shut-Off		
	Alter Casing	Fracture Treat	Reclamation	l	Well Integrity		
Subsequent Report	Casing Repair	New Construct	ion Recomplete		X Other		
	Change Plans	Plug and Aban	don Temporarily	Abandon	Change of Operator		
Final Abandonment Notice	Convert to Injection	Plug Back	Water Dispo				
13. Describe Proposed or Completed Ope	' ——				provimate duration thereof. II		
Noble Energy, Inc. transfers Operating, L.L.C. hereby coresponsible under the terms	red operation of the above ertifies that it is authorized and conditions of the leas	l by the proper l e associated with	ease interest owners n this well.	_	- ·		
EnerVest Operating, L.L.C.	operates under National	Bond Coverage,	Bond #NMB000503		OIL CONS. DIV.		
				•	DIST. 3		
•					•		
					•		
14. I hereby certify that the foregoing is true and correct. Name (Printed Typed)				,			
Bart Trevino Tide		Title Regulatory Analyst					
Signature	_	Date	Date December 9, 2013				
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by			115		I mhalio		
1 1 muly	and of this poting dans and management	angifi	Title L		Date 2305		
Conditions of approval, if any are attached. App that the applicant holds legal or equitable title to entitle the applicant to conduct operations there	those rights in the subject lease which		Office BLM	-F00			
Title 18 U.S.C. Section 1001 and Title 43 U.S.C	Section 1212, make it a crime for any		illfully to make any department	or agency of the Unite	ed States any false,		
fictitious or fraudulent statements or representa	tions as to any matter within its jurisdict	ion.					

(Instructions on page 2)