| Form 3160- 5 (April 2004) | Do n | UNITED DEPARTMENT (BUREAU OF LAN NDRY NOTICES AN ot use this form for prop toned well. Use Form 31 | D MANAGE | MENT S ON WEL | LLS | <u>18</u> | 6 If-Indian; Al | arilla Contract 102 | |
|---|--|--|---|---|---|--|--|--|--|
| | | IPLICATE - Other Inst | | | | | | A. Agreement Name and/or No. | |
| 1. Type of Well Oil Well X Gas Well Other | | | | | | | 8. Well Name and No. | | |
| 2. Name of Operator | | | | | | | Jicarilla Apache 102 #14M | | |
| EnerVest Operating, LLC3a. Address1001 Fannin St, Suite 800 Houston, TX 77002-67073b. Phone No. (include area code)713-659-3500 | | | | | | | 30-039-31193 10. Field and Pool, or Exploratory Area | | |
| 4. Location of Well (Foolage, Sec., T., R., M., or Survey Description) SHL: 1310' FSL & 1482' FWL of Sec. 9, 26N, 4W, UL N BHL: 606' FSL & 1958' FWL of Sec. 9, T26N, R4W, UL N | | | | | | | Blanco Mesaverde/Basin Dakota 11. County or Parish, State Rio Arriba, NM | | |
| 12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT | | | | | | | | | |
| <u> </u> | TYPE OF SUBMISSION TYPE OF ACTIO | | | | | | | | |
| Notice of | Intent | Acidize | Deepen | | X Production (S | | art/ Resume) Water Shut-off | | |
| | | Altering Casing | Fracture Tr | reat | Recla | mation | | Well Integrity | |
| X Subsequer | it Report | Casing Repair | New Const | truction | Recor | nplete | | X Other | |
| | | Change Plans | Plug and a | bandon | Temp | orarily Al | bandon | First Sales | |
| Final Abandonment Notice | | | | | | | | | |
| If the proposal Attach the Bon following comp testing has beer determined that 1st delive | is to deepen direction d under which the wo letion of the involved o completed. Final Ab the site is ready for f | eration (clearly state all pertinent ally or recomplete horizontally, g rk will performed or provide the loperations. If the operation resu andonment Notice shall be filed inal inspection.) 5AM, 6/9/14, SICP 92 will be allocated as s | tive subsurface locat Bond No. on file with Its in a multiple com only after all require 25 psi, SITP 8 | ions and measu th the BLM/ BL upletion or recon- ments, includin; 350 psi, we | red and true A. Requirec mpletion in g reclamant | e vertical I subseque a new int ion, have | depths or pertinen ent reports shall b erval, a Form 316 been completed, 574 MCFD. | nt markers and sands. ne filed within 30 days 50-4 shall be filed once and the operator has | |
| 14. I hereby certify Name (Printed/ Type | that the foregoing is ed) | true and correct. | ····· | | <u> </u> | | | | |
| Jeanie McMillan | | | | Sr. Regulatory Specialist | | | | | |
| Signature | PAMIE Y NO | Millan THIS SPACE | | | | | June 13, | 2014 | |
| <u>/</u> | | | | | | | | | |
| Approved by | | | | Title | | | | Date TED FOR RECORD | |
| certify that the app | licant holds legal or | ched. Approval of this notice d equitable title to those rights i plicant to conduct ope | oes not warrant or n the subject lease rations thereon. | Office | | | 1001274249 4 1012742494 | • | |
| Title 18 U.S.C. Se | ction 1001 AND T itiousor fraudulent sta | | nake it a crime for | | cnowingly a | and willf | | y department or agency of the Unite | |

