

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OIL CONS. DIV DIST. 3  
JAN 19 2018

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 type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>NM-6890</b>
2. Name of Operator <b>Hilcorp Energy Company</b>		6. If Indian, Allottee or Tribe Name
3a. Address <b>PO Box 4700, Farmington, NM 87499</b>	3b. Phone No. (include area code) <b>505-599-3400</b>	7. If Unit of CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>Surface Unit K (NESW) 2500' FSL &amp; 1820' FWL, Sec. 11, T32N, R08W</b>		8. Well Name and No. <b>Reese Mesa 4</b>
		9. API Well No. <b>30-045-21301</b>
		10. Field and Pool or Exploratory Area <b>Blanco Mesaverde / Basin Dakota</b>
		11. Country or Parish, State <b>San Juan, New Mexico</b>

12. CHECK THE 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 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 <u>Commingle</u>
	<input type="checkbox"/> Change Plans	<input 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 recompletable 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletable in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

**Hilcorp Energy Company requests permission to remove the packer and commingle the subject well according to the attached procedure and current wellbore schematic. The DHC will be submitted prior to any work being performed.**

Notify NMOCD 24 hrs  
prior to beginning  
operations

**BLM'S APPROVAL OR ACCEPTANCE OF THIS ACTION DOES NOT RELIEVE THE LESSEE AND OPERATOR FROM OBTAINING ANY OTHER AUTHORIZATION REQUIRED FOR OPERATIONS ON FEDERAL AND INDIAN LANDS**

RECEIVED

JAN 16 2018

Farmington Field Office  
Bureau of Land Management

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) <b>Priscilla Shorty</b>		Title <b>Operations/Regulatory Technician - Sr.</b>
Signature <i>Priscilla Shorty</i>		Date <b>1/15/2018</b>

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>William Tambekou</i>	Title <i>Petroleum Engineer</i>	Date <b>1/18/2018</b>
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.		Office <b>FFO</b>

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.

**Hilcorp  
REESE MESA 4  
Expense - Commingle**

Lat 36.99754 N

Long -107.6449 W

**PROCEDURE**

1. Hold pre-job safety meeting. Verify cathodic is off. Comply with all **NMOCD**, BLM, and HEC safety and environmental regulations. Scope location for base beam. If unable to use base beam, test rig anchors prior to moving in rig. **Before RU, run slickline to check for and remove any downhole equipment. If an obstruction is found and cannot be recovered, set a locking 3-slip-stop above the obstruction in the tubing.**
2. MIRU workover rig. Check casing, tubing, and bradenhead pressures and record them in WellView. If there is pressure on the BH, contact Ops Engineer.
3. Remove existing piping on casing valve. RU blow lines from casing valves and begin blowing down casing pressure. Kill well with treated **fresh** water as necessary.
4. ND wellhead and NU BOPE. Test and chart BOPs as per regulations. PU and remove tubing hanger. Tag for fill, adding additional joints as needed. Record pressure test and fill depth in WellView.
5. TOOH with tubing strings and packer (per pertinent data sheet). Do not scan. LD tubing and record findings in WellView. Make note of corrosion, scale, or paraffin and save a sample to give to engineering for further analysis.
6. If necessary, PU bit and CO to TOC at 8625' using the air package. TOOH and LD bit. If unable to CO to TOC, contact Engineer to inform how much fill was left and confirm/adjust landing depth.
7. TIH and drift tubing.

Tubing Wt./Grade: **4.7#, J-55**  
Tubing Drift ID: **1.901"**  
  
Land Tubing At: **8,550'**  
KB: **10'**

**Note: Top of 4-1/2" liner at 6397'.**

Tubing and BHA Description		
1		2-3/8" Expendable Check
1		2-3/8" (1.78" ID) F-Nipple
1		2-3/8" Tubing Joint
1		2-3/8" Pup Joint (2' or 4')
+/- 270		2-3/8" Tubing Joints
As Needed		2-3/8" Pup Joints
1		2-3/8" Tubing Joint

8. Ensure barriers are holding. ND BOPE, NU Wellhead. Pressure test tubing slowly with an air package as follows: pump 3 bbl. pad, drop steel ball, pressure tubing up to 500 psi, and bypass air. Monitor pressure for 15 min., then complete the operation by pumping off the expendable check. Note in WellView the pressure in which the check pumped off. Purge air as necessary. Notify MSO & A/L Tech that well is ready to be turned back online. RDMO.

**Well Name: REESE MESA #4**

API / UWI 3004521301	Surface Legal Location 011-032N-008W-K	Field Name BASIN DAKOTA (PRORATED GAS)	License No.	State/Province NEW MEXICO	Well Configuration Type
Ground Elevation (ft) 7,048.00	Original KB/RT Elevation (ft) 7,058.00	KB-Ground Distance (ft) 10.00	KB-Casing Flange Distance (ft)	KB-Tubing Hanger Distance (ft)	

**Original Hole, 1/15/2018 8:15:34 AM**
