Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

OMB No. 1004-0137

6. If Indian, allottee or Tribe Name:

5. Lease Number: NMSF077951

Expires: January 31, 2018

FORM APPROVED

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or re-enter an

abandoned well. Use Form 3160-3 (APD) for such proposals.							E		
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. Unit Agreement Name:				
1. Type of Well:									
Oil Well X Gas Well Other					8. Well Name and Number:				
					JACK FROST A 1				
2. Name of Operator:					9. API Well No.				
Hilcorp Energy Company					3004506267				
3a. Address 3b. Phone No. (include area code					10. Field and Pool:				
382 Road 3100 Aztec, NM 87410 505-599-3400					PC - FULCHER KUTZ::PICTURED CLIFFS				
4. Location of Well (Footage, Sec.,T.,R.,M., or Survey Description)					11. County and State:				
1650' FNL & 990' FWL Sec:26, T:027N, R:010W, Mer NMP S					SAN JUAN, NM				
12. CI	HECK APPROPR	IATE BOX(ES	S) TO INDICAT	E NATUR		NOTICE, REPORT, OTHER DA	TA		
TYPE OF SUBMISSION TYPE OF ACTION									
	Acidize	Г	Deepen		Production (Start/Resume)		Water Shut-Off		
Notice of Intent	Alter Casir	na	Hydraulic Fracturing			Reclamation		Well Integrity	
X Subsequent Report					Recomplete		X	Other	
	Change Plans		Plug and Abandon			Temporarily Abandon		Production	
Final Abandonment Notice	Convert to	Injection	Plug Back		Water Disposal			Verification	
If the proposal is to deepen direct Attach the Bond under which the completion of the involved operation	tionally or recomplete work will be perfonn tions. If the operation nent Notices must be	e horizontally, g ed or provide the results in a mu	ive subsurface lo le Bond No. on fil altiple completion	cations and e with BLM/E or recomple	measu BIA. Re tion in	g date of any proposed work and appred and true vertical depths of all periodical subsequent reports must be fanew interval, a Form 3160-4 must be inn, have been completed and the open	tinent filed w be filed	markers and zones. ithin 30 days following d once testing has	
A production verification was	s performed on the	e subject well	on 9/25/2018.	Please ex	tend t	he shut-in status.			
TP: 41 CP:	P: 41				Clinical and database and design or services produced and an implicating agent, so and of				
Meter No.: 22025	22025 Gas Co.: HEC					NMOCD			
Production Verification - con	npression needed	for well to pro	oduce over line	pressure.		DEC 2 1 2018			
Proj Type.: Production Verification									
14. I Hereby certify that the	foregoing is tru	a and correc	.4			1101111111111	-		
14. Thereby certify that the	toregoing is tru	e and correc							
Signed LMUS Christine Bro	stire L	SUCK T	Operation	ons/Regula	tory T	Pech - Sr. Date: 9/26/20	018		
		THIS SPACE	FOR FEDERA	AL OR STA	TE O	FFICE USE			
APPROVED BY Dave Manhiewicz				Title	AF	-M		Date 12/18/18	
Conditions of approval, if any, are attach certify that the applicant holds legal or ewhich would entitle the applicant to conditions.	quitable title to those	rights in the su		Office	F	FO.			

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 with its jurisdiction.

