Form 3 160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires Jnovember 30, 2000

RECEIVED FORM OMB N Expires Jnc

MAY 3 0 2019 5. Lease Serial No.

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INIV	.5.500

SUNDRY NOTICES AND REPORTS ON WELLS

	form for proposals to o Use Form 3160-3 (APD) fo				lottee or Tribe Name	
SUBMIT IN TRIPL	ICATE – Other instruct	tions on revers	e side	7. If Unit or CA	A/Agreement, Name and/or N	
1. Type of Well	_					
X Oil Well Gas Well Other				8. Well Name and No.		
2. Name of Operator				South Blanco Federal 30 #002		
Epic Energy, LLC				9. API Well No.		
3a. Address 3b.		p. Phone No. (include	Phone No. (include area code)		30-039-24919	
		05-327-4892	27-4892		10. Field and Pool, or Exploratory Area	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			Lybrook Gallup			
2020' FSL & 660 FWL; "L" Section 23, T24N, R7W			11. County or Parish, State			
				Rio Arriba County, NM		
12. CHECK APPRO	OPRIATE BOX(ES) TO INDI	CATE NATURE O	F NOTICE, RE	PORT, OR OTH	IER DATA	
TYPE OF SUBMISSION		TYPI	E OF ACTION			
Notice of Intent	Acidize	Deepen Fracture Treat	Production Reclamation	(Start/Resume)	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recomplete	e	Other	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back	Water Disp			
13. Describe Proposed or Completed Ope If the proposal is to deepen direction Attach the Bond under which the wo Following completion of the involve Testing has been completed. Final determined that the site is ready for fin	operations. If the operation results Abandonment Notices shall be filed al inspection.)	in a multiple completion only after all requirement	BLMBIA Requirent or recompletion in nts, including reclar	ed subsequent report a new interval, a F mation, have been o	ts shall be filed within 30 days form 3160-4 shall be filed once completed, and the operator has	
Epic Energy, LLC has returne	a this well to production as of	May 29, 2019		NMOCD		
				JUN 0 6 2	019	
			D	ISTRICT	111	
14. Thereby certify that the foregoing	g is true and correct					=
Name (Printed Typed) Vaness	sa Fields	Title Regulatory Specialist				
Signature		Date	Ma	y 30, 2019		
- Cun	THIS SPACE FO	R FEDERAL OR S		, 00, 2010		=
Approved by	1111/01/1021	Title		Date	ACCEPTED FOR	RECOR
					ACCEPTED.	2010
Conditions of approval, if any, are attached certify that the applicant holds legal or equ	the big of the second state of the second stat				70N 6 3	
which would entitle the applicant to conduct Title 18 U.S.C. Section 1001, mal States factitious or fraudulent state	et operations thereon. Ke it a crime for any person kn ements or representations as to	owingly and willful any matter within i	ly to make to an ts jurisdiction.	y department or	agency of ARN Hear BY:	- OFFIC

