Forn 3160-5 (June 2015)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMSF080673

| SUNDRY NOTICES AND | REPORTS ( | ON WEL | LS |
|--------------------|-----------|--------|----|
|--------------------|-----------|--------|----|

| SUNDRY NOTICES AND REPORTS ON WELLS  |   |                                      | 1414131-060673   |  |                                       |   |
|--|---|--------------------------------------|--|--|---------------------------------------|---|
| Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.  |   |                                      |  | 6. If Indian, Allottee or Tribe Name                                 |                                       |   |
| SUBMIT IN TRIPLICATE - Other instructions on page 2  |   |                                      | 7. If Unit or CA/Agreement, Name and/or No. 8910010540 |  |                                       |   |
| Type of Well   |   |                                      |  | 8. Well Name and No.<br>SAN JUAN 27-4 UNIT 40                        |                                       |   |
| Name of Operator     HILCORP ENERGY COMPANY     E-Mail: ettrujillo@hilcorp.com  Contact: ETTA TRUJILLO E-Mail: ettrujillo@hilcorp.com  |   |                                      |  |  | 9. API Well No.<br>30-039-20142-00-C1 |   |
| 3a. Address<br>1111 TRAVIS STREET<br>HOUSTON, TX 77002   | 3b. Phone No. (include area code) Ph: 505-324-5161                              |                                      |  | 10. Field and Pool or Exploratory Area BASIN DAKOTA BLANCO MESAVERDE |                                       |   |
| 4. Location of Well (Footage, Sec., T  | ., R., M., or Survey Description,   | )                                    |  |  | 11. County or Parish, State           |   |
| Sec 6 T27N R4W SWNE 1779<br>36.603973 N Lat, 107.287506  |   |                                      |  | RIO ARRIBA COUNTY, NM  |                                       |   |
| 12. CHECK THE AF   | PPROPRIATE BOX(ES)  | TO INDICA                            | TE NATURE O  | F NOTICE,  | REPORT, OR OTHI                       | ER DATA                                 |
| TYPE OF SUBMISSION   | TYPE OF ACTION  |                                      |  |  |                                       |   |
| ☐ Notice of Intent   | ☐ Acidize   | ☐ Dee                                | pen  | ☐ Product  | ion (Start/Resume)                    | ■ Water Shut-Off                        |
|  | ☐ Alter Casing  | ☐ Hyd                                | raulic Fracturing                                      | ☐ Reclama  | ation                                 | ■ Well Integrity                        |
| Subsequent Report  | ☐ Casing Repair   | □ New                                | Construction   | ☐ Recomp   | lete                                  | <b>⊠</b> Other                          |
| ☐ Final Abandonment Notice   | ☐ Change Plans  | ☐ Plug                               | and Abandon  | □ Tempor   | arily Abandon                         | Subsurface Commin                       |
|  | ☐ Convert to Injection  | Plug                                 | Back   | ☐ Water □  | Pisposal                              |   |
| following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fire the subject well is now production.  Please see attached production.   | nandonment Notices must be file<br>inal inspection.<br>cing as Blanco Mesaverde | ed only after all                    | requirements, includ                                   | ling reclamation   | n, have been completed an             | 4 must be filed once d the operator has |
| Well recompletion report approved 06/26/2019.  |   |                                      |  |  |                                       |   |
|  |   |                                      | DIS  | TRICT I  | 11                                    |   |
|  |   |                                      |  |  |                                       |   |
| 14. I hereby certify that the foregoing is   | Electronic Submission #4  | NERGY COMP                           | ANY, sent to the                                       | Farmington   |                                       |   |
| Name (Printed/Typed) ETTA TRU  | JJILLO  |                                      | Title OPERA  | TIONS REG  | SULATORY TECH SE                      | ?                                       |
|  |   |                                      |  |  |                                       |   |
| Signature (Electronic S  | Submission)   |                                      | Date 09/24/2   | 019  |                                       |   |
|  | THIS SPACE FO   | R FEDERA                             | L OR STATE   | OFFICE U   | SE                                    |   |
| _Approved By ACCEPT  | ED  |                                      | JOHN HO<br>TitlePETROLE                                |  | EER                                   | Date 09/25/201                          |
| Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of t | itable title to those rights in the   |                                      | Office Farming   | iton   |                                       |   |
| Title 18 U.S.C. Section 1001 and Title 43<br>States any false, fictitious or fraudulent s  | U.S.C. Section 1212, make it a statements or representations as                 | crime for any pe<br>to any matter wi | rson knowingly and<br>thin its jurisdiction.           | willfully to ma  | ke to any department or ag            | gency of the United                     |

| Hilcorp Energy Company  |           |                     |               |   | Distribution: NMOCD Original BLM 5 Copies Accounting Well File Revised: March 9, 2018 |      |                                      |
|---|-----------|---------------------|---------------|---|---|------|--------------------------------------|
| PRODUCTION ALLOCATION FORM  |           |                     |               |   | Status PRELIMINARY   FINAL   REVISED   □  |      |                                      |
| Commingle Type  |           |                     |               | Date: 9/11/2019   |   |      |                                      |
| SURFACE DOWNHOLE Type of Completion NEW DRILL RECOMPLETION PAYADD COMMINGLE   |           |                     |               |   | API No. 30-039-20142 DHC No. DHC 4975 Lease No. NMSF080673 Federal                    |      |                                      |
| Well Name   |           |                     |               |   | Well No.  |      |                                      |
| San Juan 2 Unit Letter  | 27-4 Unit |                     |               | #40   |   |      |                                      |
| G G   | Section 6 | Township T27N       | Range<br>R04W | 177   | Footage<br>5'FNL & 1474'FEL   |      | County, State Rio Arriba, New Mexico |
| Completion Date Test Method   |           |                     |               |   |   |      |                                      |
| 06/16/2019 HISTORICAL ☐ FIELD TEST ☐ PROJECTED ☐ OTHER ☒  |           |                     |               |   | HER 🛛   |      |                                      |
| JUSTIFICATION OF ALLOCATION: Hilcorp requests that production for the downhole commingle be allocated using the subtraction method. The base formation is the Dakota and the added formation to be commingled is the Mesaverde. The subtraction method applies an average monthly production forecast to the base formation(s) using historic production. All production from this well exceeding the forecast will be allocated to the new formation(s). A fixed percentage based allocation will be submitted after the fourth year of production. See attached documents for production forecast.  Oil production will be allocated based on average formation yields from offset wells: MV - 96%, DK - 4% |           |                     |               |   |   |      |                                      |
| APPROVE   | BY        |                     | DATE          | - المراجعة | TITLE   |      | PHONE                                |
| X   | 2         |                     | <u>e</u>      |   | Area Operations Man   | ager | 713-209-2449                         |
| Nick Kun  | ze        | $ \longrightarrow $ | <u>-</u>      |   |   |      |                                      |
|   |           |                     |               |   |   | ,    |                                      |
|   |           |                     |               |   |   |      |                                      |