Oco Hoppa

Form 3160-5 (March 2012)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014

5. Lease Serial No.	
LC 0000E0	

BUR	EAU OF LAND MAN	5. Lease Serial No. LC-069052					
Do not use this f		ORTS ON WELLS to drill or to re-enter an APD) for such proposa		6. If Indian, Allottee or	r Tribe Name	_	
SUBMI	T IN TRIPLICATE – Other	instructions on page 2.			ment, Name and/or No.	_	
I. Type of Well					E QUEEN SAND UNIT		
Oil Well Gas W	/eil	JECTOR			E QUEEN SAND UNIT #6		
2. Name of Operator CHAPARRAL ENERGY, LLC.				9. API Well No. 30-025-12263			
3a. Address 01 CEDAR LAKE BLVD. OKLAHOMA CITY, C	DK 73114	3b. Phone No. (include area co 405-478-8770	ode)	10. Field and Pool or E DOLLARHIDE QUE	' '		
Location of Well <i>(Footage, Sec., T.,</i> 90' FNL & 2310' FEL, UNIT B, SECTION 30-72	R.,M., or Survey Description 24S-38E	)		II. County or Parish, S LEA COUNTY, NM	State	_	
12. CHEC	K THE APPROPRIATE BO	X(ES) TO INDICATE NATUR	E OF NOTIC	CE, REPORT OR OTHE	ER DATA		
TYPE OF SUBMISSION		ТҮ	PE OF ACT	TION			
Notice of Intent	Acidize Alter Casing Casing Repair	Deepen Fracture Treat New Construction	Recla	uction (Start/Resume) amation mplete	Water Shut-Off  Well Integrity  ✓ Other BRADENHEAD	_	
✓ Subsequent Report	Change Plans	Plug and Abandon		oorarily Abandon	TEST		
Final Abandonment Notice	Convert to Injection	Plug Back	☐ Wate	r Disposal		_	
<ol> <li>Describe Proposed or Completed Op the proposal is to deepen directional Attach the Bond under which the way following completion of the involvatesting has been completed. Final addetermined that the site is ready for</li> </ol>	ally or recomplete horizontal york will be performed or project ed operations. If the operation Abandonment Notices must	ly, give subsurface locations and ovide the Bond No. on file with E on results in a multiple completion	l measured an BLM/BIA. R on or recomp	nd true vertical depths of dequired subsequent reposite detion in a new interval,	f all pertinent markers and zones. orts must be filed within 30 days a Form 3160-4 must be filed once	It	
9/17/2013 - CONDUCTED BRADEN 020 PSI.	IHEAD TEST, PASSED C	OK. INSTALLED CHOKE TO R	KEEP INJEC	CTION PRESSURE A	T THE WELLHEAD BELOW		
				HOBBS OCE			
				RECEIVE	D		

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) LINDSAY REAMES Title	ENGINEERING TECH	1 11
Signature Lindbuld Reumla Date	10/23/2013	ACCEPTED FOR RECORD
THIS SPACE FOR FEDERAL	OR STATE OFFIC	
Approved by	Title	Amostus / Para
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	CARLSBAD MELD OFFICE

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.

## State of New Mexico

## Energy, Minerals and Natural Resources Department Oil Conservation Division Hobbs District Office

					NHEAD TES	ST RE	PORT	٦ 		1
Operator Name  CHAPARRAL ENERGY LLC  Property Name  West DollARHIDE QUEEN SAND UNIT							36025/22630000 Well No.			
WOSTD	011111111111	de One	on Cand 1	Property Name		/				Well No.
<u> </u>	U///JK/FI	V WITE	TO SHICK D		Surface Location	n				
UL - Lot	Section 30	Township 245	Range 38 £		Feet from 990	FNL.	S Line	Feet Fro	m E/W Line	County L.C.A
				1	Well Status					
Well	Status		SHUT-IN		PRODUCING			DATE		
f bradenhead			HEAD AND INT	Ol	TO ATMOSPHE		VIDUALI	LY FOR 15 N	MINUTES EACH	
		(A)St	ırf-Interm	(B)Interm(1	)-Interm(2)	(C)Inter	rm-Prod		(D)Prod Csng	(E)Tubing
Pressure			0						0	1160
Flow Charac										
Puff		7	77 N		Y / N	Y / N		.	Y / N	
Steady F Surges			Y/N Y/N		Y / N Y / N	Y/N			Y / N Y / N	
Down to no			Y / N	İ	/ N	Y/N Y/N			Y / N	
Gas or C	-		Y / N		7 / N		Y / N		Y / N	
Water			Y / N	<u> </u>	7 / N	Y/N			Y / N	
f bradenhead CLEAR	flowed wat	er, check all FRE	of the description		LTY		SULFU	UR	BLACE	ζ
Inst	alle	d a	cheke	L, C	Lut Ba	ck <sup>-</sup>	to	Acc	ep: or Rec	MET SI ord Only S/2014
Signature:	) illiar	n Deu	nley					OIL (	CONSERVATION	ON DIVISION
	10:17	200 7.	V. C					Datamad in	אבתתת	
Printed name: Title: Proc E-mail Addres	d. Tecl		NZAI					Entered in Re-test	IO KBUM2	

Witness:

