

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB No. 1004-0137
Expires: January 31, 2018

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

HOBBS OCD

NOV 02 2015

RECEIVED

5. Lease Serial No. **26835 NMNM 23019**

6. If Indian, Allottee or Tribe Name

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No. Federal #1

9. API Well No. 30-025-26335

10. Field and Pool or Exploratory Area
Tan, Yts, 7R)

State

E-PERMITTING
CONVERSION
RETURN TO
CSNG
INT TO PA
ENVIRO
P&A NR
INJECTION
RBDMS
TA
CHG LOC
P&A R

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator Herman L. Loeb LLC

3a. Address PO Box 838
Lawrenceville, Ill. 62439

3b. Phone No. (include area code)
(618) 943-2227

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit E, 2.210' fr/Nn. 890' fr/W, Sec. 21/25S/37E

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF

TYPE OF SUBMISSION	TYPE OF OPERATION		
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Change Plans	<input checked="" 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. the proposal is to deepen directionally or recompleate 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 recompleation 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 detennined that the site is ready for final inspection.)

10/07/2015 TIH w/2-2/3" tbg. Spot 21sx cmt plug @ 2,681'.

10/08/2015 Tagged plug @ 2,438'. Spotted 9.5 ppg Salt Gel Spacer fr/2,438' to 1,100'. Ppd 53 sx cmt out csg leak fr/1,098'-1,114'.

10/09/2015 Tagged plug @ 904'. Spotted 9.5 ppg Salt Gel Spacer fr/904' to surface. Perforated 60'-61'. Squeezed perforations w/8.5 sx to 580 psi with no circulation up 4-1/2" casing annulus. Cement standing at surface.

10/13/2015. Cut off all casing 4' below ground level. Capped casing and installed dry hole marker.

EXPLANATION
DATE 4-10-16
Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.

ACCEPTED FOR RECORD

OCT 19 2015

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Michael Polley

Title Agent for Herman L. Loeb LLC

Signature

Date

10/13/2015

THE SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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

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.

(Instructions on page 2)

MAB/OCD 11/12/2015

NOV 18 2015

jm

COMPANY: Herman Loeb LLC

9223 Lakeview Road • Trinidad, CO 81082

MICHAEL POLLEY

WELL NAME: Federal 1COMPLETION, WORKOVER
AND
DRILLING SUPERVISIONLEGAL: E, 21-255-37E

PHONE: 719-846-3434

MOBILE: 719-342-5600

polleyms@gmail.com

VOL. BETWEEN PIPE & HOLE CAP.

	BBU/FT	FT/BBU	CF/LF
4 1/2 - 7 7/8	.0406	24.65	2278
5 1/2 - 7 7/8	.0309	32.41	1733
8 5/8 - 12 1/4	.0735	13.61	4127
9 5/8 - 12 1/4	.0558	17.93	3132
13 3/8 - 17 1/2	.1924	8.08	6946

TUBING & CASING SIZE & CAP.

	WT.	BBU/FT	FT/BBU
2 3/8	4.8	.0039	258.65
2 7/8	6.5	.0058	172.76
3 1/2	9.3	.0087	114.99
4 1/2	10.5	.0159	62.70
4 1/2	11.6	.0155	64.34
5 1/2	15.5	.0238	42.01
5 1/2	17.0	.0232	43.02
5 1/2	20.0	.0222	45.09
5 1/2	23.0	.0212	47.20
8 5/8	32.0	.0609	16.41
9 5/8	36.0	.0773	12.94

D.P. SIZE _____ TUBING SIZE: _____ CASING SIZE: _____

HOLE SIZE: _____ PERFS: _____

PACKER SETTING: _____ BP SETTING: _____ MAX RATE: _____

MAX PSI: _____ BHST: _____ FORM: _____ TAIL PIPE: _____

VOL. BETWEEN PIPE & PIPE CAP.

	WT	BBU/FT	FT/BBU	CF/LF
1/38 - 4 1/2	11.6	.0101	99.37	0565
3/8 - 5 1/2	17.0	.0178	56.28	0898
7/8 - 5 1/2	17.0	.0152	65.71	0854
7/8 - 7	23.0	.0313	31.91	1760

