	UNITED STATI EPARTMENT OF THE REAU OF LAND MAN	INTERIOR	OCD Hobb	Expires: October 31, 2014 5. Lease Serial No.		
Do not use this	NOTICES AND REP form for proposals Use Form 3160-3 (A	to drill or to re-enter		NM-14496 6. If Indian, Allottee or Tribe Name		
SUBI	MIT IN TRIPLICATE - Othe	7. If Unit of CA/Agreement, Name and/or No.				
1. Type of Well	Well Other		2 1 2015	8. Well Name and No. Ling Federal No. 6		
2. Name of Operator Fasken Oil and Ranch, Ltd.	1			9. API Well No. 30-025-39122		
3a. Address 6101 Holiday Hill Road Midland, TX 79707	3b. Phone No. (include REC) 432-687-1777	CEIVED	10. Field and Pool or Exploratory Area Apache Ridge; Bone Springs			
4. Location of Well (Footage, Sec., 2130' FNL & 660' FWL, Sec. 31, T19S, R34E	T.,R.,M., or Survey Description	11. County or Parish, State Lea, New Mexico				
12. CH	ECK THE APPROPRIATE B	OX(ES) TO INDICATE NATI	JRE OF NOTIO	CE, REPORT OR OTHER DATA		
TYPE OF SUBMISSION			ION			
Notice of Intent	Acidize	Deepen Fracture Treat	_	amation (Start/Resume) Water Shut-Off Well Integrity		
Subsequent Report	Casing Repair	New Construction	=	ecomplete Other Reduce Pad		
Final Abandonment Notice	Convert to Injection	Plug Back	Wate	r Disposal		
the proposal is to deepen direction Attach the Bond under which the following completion of the invo	onally or recomplete horizonta e work will be performed or pr olved operations. If the operat	lly, give subsurface locations a ovide the Bond No. on file wit ion results in a multiple compl	and measured an th BLM/BIA. R etion or recomp	te of any proposed work and approximate duration the d true vertical depths of all pertinent markers and zor cequired subsequent reports must be filed within 30 d letion in a new interval, a Form 3160-4 must be filed reclamation, have been completed and the operator h	nes. ays once	

Fasken Oil and Ranch, Ltd. hired contractors to reduce the pad size on the Ling Federal No. 6 and this work has been completed in order to bring this well into compliance.

determined that the site is ready for final inspection.)

Accepted for Record Purposes. Approval Subject to Onsite Inspection. If BLM Objectives are not achieved, additional work may be required. Date: 12-12-15 Signature: Long G. Rus

		Signature				
14. I hereby certify that the foregoing is true and correct. Name (<i>Printed/Typed</i>) Kim Tyson	Title	Regulatory Analyst	/			
Signature Kim Joan	Date	ate 04/14/2014				
THIS SPACE FOR FED	DERAL	OR STATE OFFICE	EUSE		13.5	
Approved by					The second second	
		Title		Date		
Conditions of approval, if any, are attached. Approval of this notice does not warrant o that the applicant holds legal or equitable title to those rights in the subject lease which 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 fictitious or fraudulent statements or representations as to any matter within its jurisdice		nowingly and willfully to mak	ke to any departme	ent or agency of the Unit	ited States any false	
(Instructions on page 2)	1.17	ALL AND			1.	

Accepted for Record Only MBB/OCD 12/21/2015 DEC 22 2015