Form 3160-5 (June 2015)

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

OCD-HOBBS

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

5. Lease Serial No.

SUNDRY	NMNM78273	NMNM78273				
SUNDRY Do not use thi abandoned we	6. If Indian, Allottee	NMNM78273  6. If Indian, Allottee or Tribe Name				
SUBMIT IN	TRIPLICATE - Other ins	tructions on page 2	7. If Unit or CA/Agra	eement, Name and/or No.		
Type of Well		RECEN	8. Well Name and No	1		
Oil Well ☐ Gas Well ☐ Oth	LUCY FEDERAL					
2. Name of Operator READ & STEVENS	Contact:	KELLY BARAJAS read-stevens.com	9. API Well No. 30-025-40055			
3a. Address P. O. BOX 1518 ROSWELL, NM 88202	7	3b. Phone No. (include area code) Ph: 575-624-3760	10. Field and Pool or LEA YATES	Exploratory Area		
4. Location of Well (Footage, Sec., T	., R., M., or Survey Description	)	11. County or Parish,	, State		
Sec 14 T20S R34E 1980FSL	330FWL 🗸		LEA COUNTY,	NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICATE NATURE OF	NOTICE, REPORT, OR OT	HER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION					
	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off		
☐ Notice of Intent	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclamation	☐ Well Integrity		
Subsequent Report	☐ Casing Repair	☐ New Construction	Recomplete	Other		
Final Abandonment Notice	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	Workover Operation		
	☐ Convert to Injection	□ Plug Back	☐ Water Disposal			
Attach the Bond under which the wor following completion of the involved testing has been completed. Final At determined that the site is ready for final 1/25/2017  MIRU. Prime pumps and press w/23 bbls Bfrac linear and XL w/activator. Max rate 16.1 bp.	ally or recomplete horizontally, the will be performed or provide operations. If the operation repandoment Notices must be fill in the properties of the provided of the provi	give subsurface locations and measur the Bond No. on file with BLM/BIA. sults in a multiple completion or record only after all requirements, including a si and reset kills to 3650 psi. E of 16/30 White and 5,125# 16 max pressure 3741 psi, average and 15 min SI 2070 psi. 90 min	ed and true vertical depths of all perti Required subsequent reports must be impletion in a new interval, a Form 31 ng reclamation, have been completed stablish rate /30 Cool Set le pressure 2867	nent markers and zones. e filed within 30 days 60-4 must be filed once		
14. I hereby certify that the foregoing is	Electronic Submission #	365034 verified by the BLM Well AD & STEVENS, sent to the Hob				
None (Drive 1/E ) MELLY BA	Committed to AFMSS fo	r processing by PRISCILLA PER	REZ on 02/03/2017 ()			
Name (Printed/Typed) KELLY BA	AKAJAS	Title REPORT	DTEN END DECAR	n l		
		AUUE	ורובט רטוז וזבטטוי	עו		
Signature (Electronic S	Submission)	Date 01/26/26	17	1		

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)

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.

Approved By

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Title

Office

Swan

**BUREAU OF LAND MANAGEMENT** 

CARLSBAD FIELD OFFICE



Date

Submit within 45 days	of well	01.1	-CM				Re	evised November 6, 2013
Submit within 45 days of well completion State of New Mexico				4 14501 450				
	1	Energy, I	Minerals and I	Vati	ıral	1. WELL APIN	NO. -025-40055	
				40.00	ai cai	,		
			Resources			2. Well Name:		
*		Oil Cor	servation Div	isio	n	LU	CY FEDERA	L #002
		1220	S. St Francis	Dr				
		1220	S. St Flaticis	DI.		3. Well Numbe		
		San	ta Fe, <b>NM</b> 875	05			2	
HYDRAUL	IC FRAC	TURING FI	LUID	-		4. Surface Hol		200 5 041
DISCLOS						Feet from:19	80 N/	wnship:20S_Range:34  S_Line:S W_Line:W
Original						5. Bottom Hole		200 - 24
☐ Amendmer	nt					Feet from: 19		wnship:20S Range:34 S Line:S
Allolulic						Feet from:33	0 E/	W Line:W
						6. latitude:	lo 2.5713387	ngitude: -103.538452
						7. County:	2.0710007	-103.330432
	-					Le	a	
8. Operator Name and A	Address:				9. OGRID		10. Phone Nu	mber: 575-
	TEVENS INC					18917	622-3770	
P. O. Box 1 Roswell 88								
11. Last Fracture Date:		Frac Performed by:	Cudd Energy Services		12. Produc	ction Type:		
13. Pool Code(s):					14 Gross	O Fractured Interv	al·	
37620					14. 01033	3,466 ft to 3,	And the second second	
15. True Vertical Depth (	(TVD):				16. Total \	/olume of Fluid F	Pumped:	1
3,860 ft 17. Total Volume of Re-I	Use Water Pumpe	d:			18. Percer	10,309 gals nt of Re-Use Wa	ter in Fluid Pum	ped:
0 gals						%		
			ID CONCENTRATION					
Trade Name	Supplier	Purpose	Ingredients		f) Chemical ct Service :		Ingredient	Maximum Ingredient Concentration in HF
18/2424		Carrier / Dans		7722	40.5	Additive (	% by mass)	Fluid (% by mass)
Water		Carrier / Base Fluid		7732-	18-5		100%	70.41512%
Sand		Proppant	Silicon Dioxide	14808	3-60-7		100%	25.32121%
Super DC/LC	Sandtrol	Proppant	Silicon Dioxide	14808			97%	2.40207%
TLC/THS Opti RCS			P/F Novolak Resin	9003-			5% 1%	0.12382%
B-15	Brenntag	Biocide	Hexamethylenetetramine Tetrakis (hydroxymethyl)				20%	0.02476% 0.00596%
	Dremitag	Broade	phosphonium sulfate	00000	000		2070	0.000007
			Water	7732-			80%	0.02382%
CS-15	Ace Completions	Clay Control	Choline Chloride	67-48			100%	0.07927%
	Completions		Magnesium Chloride Water	7791- 7732-			100% 100%	0.07927% 0.07927%
CS-135	Chemplex	Permanent	Cationic Polymers	NA	10-5		100%	0.04646%
00.455		Clay Control						
SG-15G	Multiple Suppliers	Polymer	Guar Gum Petroleum Distillate	9000- 64742			50% 55%	0.31748% 0.34923%
	Suppliers		(Mineral Oil)	04/42	-47-0		55%	0.34923%
			Bentonite Clay	14808	3-60-7		2%	0.0127%
VI 005			Surfactant	68439			2%	0.0127%
XL-335	PfP Technology	Crosslinker	Sodium Metaborate	7775-			40%	0.05814%
GB-2	Multiple	Breaker	Glycerol Ammonium Persulfate	56-81 7727-			45% 99.9%	0.06541% 0.00984%
	Suppliers							
FA-510	Chemplex,	Foaming	Ethanol	64-17			30%	0.10619%
	L.C.	Agent	Isopropanol Ammonium Alcohol	67-63 68187			20% 30%	0.0708% 0.10619%
			Ether Sulfate	0010/	-17-7		30%	0.10019%
Superset W	Santrol	Resin	Methanol	67-56	-1		50%	0.04351%
		Activator	Poly(oxyethylene)	9016-	45-9		54%	0.04699%
GB-150	Chemplex	Breaker	nonyphenol ether Mannanase Enzymes	Trado	Secret		2%	0.0018%
OD-100	Onemplex	DIEGNEI	Sodium Chloride	7647-			15%	0.01352%
			Water	7732-	E 657 E		90%	0.08115%
	1	1	1	1		1		1

Nitrogen	Multiple	Foaming Agent- Energized Fluids	N2	7727-37-9	100%	0.16157%	
MCS-376	Ace	Surfactant	Diethanolamine	111-42-2	1%	0.00102%	
	Completions		Solvent Naptha (Petroleum), Heavy	64742-94-5	1%	0.00102%	
	1		Alcohol	68609-68-7	5%	0.00512%	
			Isotridecanol, ethoxylated	9043-30-5	5%	0.00512%	
			Poly(oxy-1,2-ethanediyl), alpha hexyl-omega- hydroxy-	31726-34-8	5%	0.00512%	
			Coconut diethanolamide	68603-42-9	8%	0.0082%	
	:		Proprietary	NA	15%	0.01537%	
			Ethylene Oxide/propylene oxide co-polymer	9003-11-6	10%	0.01025%	
			Water	7732-18-5	75%	0.07684%	
20. I, as Operator, h	ereby certify that the int	formation shown or	this disclosure form is true and	complete to the best o	of my knowledge and belief.		
Signature:	Signed Electronically Printed Name: Kelly Barajas				Title: Production Analyst		
Date:	1/26/2017					_	
E-mail Address:	kbarajas@read- stevens.com						

NMOCD does not require the reporting of information beyond MSDS data as described in 29 CFR 1910.1200. NMOCD does not require the reporting or disclosure of proprietary, trade secret or confidential business information.