

OCD-HOBBS

Form 3160-5
(June 2015)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM 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

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM78273
2. Name of Operator READ & STEVENS		6. If Indian, Allottee or Tribe Name
3a. Address P. O. BOX 1518 ROSWELL, NM 88202		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 575-624-3760		8. Well Name and No. LUCY FEDERAL 2
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 14 T20S R34E 1980FSL 330FWL		9. API Well No. 30-025-40055
		10. Field and Pool or Exploratory Area LEA YATES
		11. County or Parish, State LEA COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input checked="" type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input 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. If the proposal is to deepen directionally or recomple 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 recompletion 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 determined that the site is ready for final inspection.

1/18/2017 - 1/20/2017

TIH w/2 7/8" x 5 1/2" pkr w/unloader, 2 7/8" OD seating nipple & 110 jnts 2 7/8" tbg. Tag RBP @ 3550'. Pull up & set pkr at 3548'. Load tbg w/7 bbls 2% KCL wtr. Pressure up to 1020# & hold for 15 min. Held ok. Release pressure & pkr. LD 1 jnt tbg. Dump 1 sx blasting sand dwn tbg. Chase sand to bottom w/20 bbls 2% KCL wtr. TOH & LD 5 jnts 2 7/8" tbg. Set pkr at 3358'. Load backside w/3 bbls 2% KCL. Pressure up to 500# & hold for 15 min. Held ok. Release pressure. RU swab. Made 8 swab runs swabbing tbg dry. Wait 30 min & made swab run. Had 400' fluid entry in 30 min. Making 1 run per hr for 2 hrs. 400' fluid entry per hr. Rec 28 BW, 0 BO, no gas show. 1800' fluid entry overnight. 100% wtr on 1st swab. Swab tbg dry in 3 runs. Swab once per hr for 8 hrs. 400' fluid entry per hr. No oil or gas shows. Swab back 21 BW, 0 BO. 1800' fluid entry overnight. 100% wtr. Swab back 13 BW, 0 BO. Total swabbed back in 3 days is 62 BW.

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #367083 verified by the BLM Well Information System

For READ & STEVENS, sent to the Hobbs

Committed to AFMSS for processing by DEBORAH MCKINNEY on 02/15/2017 ()

Name (Printed/Typed) KELLY BARAJAS

Title REPORT PREPARER

Signature (Electronic Submission)

Date 02/15/2017

THIS 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

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD 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)

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