Form 3160-5

(June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR HOBBS BUREAU OF LAND MANAGEMENTOBBS OCD

NMOCD

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

5. Lease Serial No. NM 02218

6. If Indian, Allottee or Tribe Name

SUNDRY NOTICES AND REPORTS ON WELLS

		to drill or to∕re-enter a PD) for such proposal				
SUBMIT IN TRIPLICATE - Other instructions on page 2 FIVED				7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well			·U			
✓ Oil Well Gas V	8. Well Name and No. El Zorro E Federal #1					
2. Name of Operator ENERGYQUES	TII, LLC : (HAL	CON HOLDING	INC)	9. API Well No. 30-04	1-20423	
3a. Address 4526 RESEARCH FOREST DR., STE. 200 THE WOODLANDS, TX 77381		3b. Phone No. (include area code)		10. Field and Pool or Exploratory Area		
		(281) 875-6200		Allison; San Andres, East		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)				11. Country or Parish, State		
660' FSL & 1980' FEL; Sect. 28, T	/		Roosevelt County, NM			
12. CHE	CK THE APPROPRIATE B	OX(ES) TO INDICATE NATUR	E OF NOTI	CE, REPORT OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
✓ Notice of Intent				uction (Start/Resume) amation	Water Shut-Off Well Integrity	
Subsequent Report			=	mplete oorarily Abandon	Other	
Final Abandonment Notice	Convert to Injection Plug Back Water Disposal					
13. Describe Proposed or Completed Of the proposal is to deepen directionathe Bond under which the work will completion of the involved operation completed. Final Abandonment Notice is ready for final inspection.)	Illy or recomplete horizontall be perfonned or provide the ons. If the operation results in	y, give subsurface locations and e Bond No. on file with BLM/BI a multiple completion or recom	measured an A. Required pletion in a r	d true vertical depths of subsequent reports must new interval, a Form 31	f all pertinent markers and zor at the filed within 30 days follo 60-4 must be filed once testin	nes. Attac wing g has bee

Commence reclamation operations as follows: Remove power poles and all surface equipment, break-up and remove caliche pad, rip and cross-rip location and seed with BLM mix.

Approved

14. I hereby certify that the foregoing is true and correct. Name (<i>Printed/Typed</i>) Jeff Teare		Vice President, Operations Title					
Signature To Deme	Date	te 05/22/2017					
THE SPACE FOR FEDERAL OR STATE OFICE USE							
Approved by							
		Title	Date				
Conditions of approval, if any, are attached. Approval of this notice does not warre certify that the applicant holds legal or equitable title to those rights in the subject 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 pers	on knowingly and willfully to make to any o	department or agency of the United States				

(Instructions on page 2)

7110/2017

any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.