Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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.					5. Lease Serial No. NMNM56265	
					6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit or CA/Agreement, Name and/or No.	
Type of Well					8. Well Name and No. LEA SOUTH 25 FEDERAL COM WCA 12	
Name of Operator Contact: JENNIFER ELROD CHISHOLM ENERGY HOLDINGS LLŒ-Mail: jelrod@chisholmenergy.com					9. API Well No. 30-025-43110	
3a. Address 801 CHERRY ST., SUITE 120 FORT WORTH, TX 76102	3b. Phone No. (include area code) Ph: 817-953-3728			10. Field and Pool or Exploratory Area LEA; BONE SPRING, SOUTH		
4. Location of Well (Footage, Sec., T)			11. County or Parish, State		
Sec 25 T20S R34E Mer NMP 32.537760 N Lat, 103.506380				LEA COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICAT	E NATURI	E OF NOTICE,	REPORT, OR OTH	HER DATA
TYPE OF SUBMISSION	TYPE OF ACTION					
Notice of Intent ■ Notice of Intent	☐ Acidize	☐ Deep	en	☐ Produc	tion (Start/Resume)	☐ Water Shut-Off
_	☐ Alter Casing	☐ Hydr	aulic Fracturi	ng Reclam	ation	■ Well Integrity
☐ Subsequent Report	☐ Casing Repair	□ New	Construction	□ Recom	plete	⊠ Other
☐ Final Abandonment Notice	☐ Change Plans	☐ Plug	and Abandon	☐ Tempo	rarily Abandon	Change to Original A
	☐ Convert to Injection	☐ Plug	Back	■ Water I	Disposal	
Attach the Bond under which the wor following completion of the involved testing has been completed. Final Abdetermined that the site is ready for fich CHANGE TO ORIGINAL PER Request change to well Name Plat attached.	operations. If the operation repandonment Notices must be fill in all inspection. MIT FOR NAME: BCW a from: Lea South 5 Feder	sults in a multiple ed only after all re	completion or equirements, in	recompletion in a cluding reclamation	new interval, a Form 316 n, have been completed a	0-4 must be filed once
	Electronic Submission #- For CHISHOLM E					
Name (Printed/Typed) JENNIFER	Title SENIOR REGULA		TORY TECH			
Signature (Electronic S	Submission)		Date 01/2	4/2018		
	THIS SPACE FO	R FEDERA	OR STAT	TE OFFICE U	SF Will	
Approved By Conditions of approval, if any, are attache certify that the applicant holds legal or equivalent would entitle the applicant to conduct the second of the sec	subject lease		and scan	LM approvals will ntly be reviewed ned	agency of the United	
States any false, fictitious or fraudulent s	statements or representations as	to any matter wit	nin its jurisdict	ion.		