

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

Operator

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.**

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM56265
2. Name of Operator CHISHOLM ENERGY HOLDINGS LLC-Mail: jelrod@chisholmenergy.com		6. If Indian, Allottee or Tribe Name
3a. Address 801 CHERRY ST., SUITE 1200 UNIT-20 FORT WORTH, TX 76102	3b. Phone No. (include area code) Ph: 817-953-3728	7. If Unit or CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 25 T20S R34E Mer NMP SESE 300FSL 340FEL 32.537761 N Lat, 103.506269 W Lon		8. Well Name and No. LEA SOUTH 25 FED COM WCA 12H
10. Field and Pool or Exploratory Area LEA, BONE SPRING, SOUTH Wolfcamp		9. API Well No. 30-025-43110
11. County or Parish, State LEA COUNTY, NM		

HOBBS OCD

MAY 10 2018

RECEIVED

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original A
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	PD

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.

BCW

CHANGE TO ORIGINAL DRILLING PERMIT FOR FIELD NAME:  
CHANGE FIELD AND POOL NAME FROM LEA; BONE SPRING, SOUTH TO WC-025 G-08 S203435D;WOLFCAMP.

PLAT ATTACHED.

+ pending change of operator approved

14. I hereby certify that the foregoing is true and correct. Electronic Submission #408582 verified by the BLM Well Information System For CHISHOLM ENERGY HOLDINGS LLC, sent to the Hobbs Committed to AFMSS for processing by JENNIFER SANCHEZ on 03/21/2018 ( )	
Name (Printed/Typed) JENNIFER ELROD	Title SENIOR REGULATORY TECH
Signature (Electronic Submission)	Date 03/20/2018
THIS SPACE FOR FEDERAL OR STATE OFFICE USE	
Approved By	Title
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	
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 \*\*