

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED  
OMB No. 1004-0137  
Expires: October 31, 2014

**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.  
NMMN 53380

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

HOBBS OCD

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

AUG 10 2015

2. Name of Operator  
Seely Oil Company

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.  
Caviness 10 Federal #1

3a. Address  
815 W. 10th Street  
Fort Worth, Texas 76102

3b. Phone No. (include area code)  
(817) 332-13277

9. API Well No.  
30-025-30311

10. Field and Pool or Exploratory Area  
Corbin Queen Central

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
2026' FSL & 1961' FEL.  
J-Sec. 10-T18S-R33E

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 checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input checked="" 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"/> Fracture Treat	<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 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 recompleat 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 recompleat 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. MI & RU Completion Unit. TOH w/ rods & tbq.
2. TIH w/ pkr. & tbq. Set pkr @ 4160' +/-.
3. Squeeze perforations from 4244-4282 in stages until a squeeze pressure is attained. TOH
4. TIH w/ 4 3/4" bit & tbq. Drill out cmt. & test. Drill out CIBP @ 7290'. TOH
5. TIH w/ pkr and tbq. Set pkr @ 7290'.
6. Squeeze perforations from 7342-7352 in stages until a squeeze pressure is attained. TOH
7. TIH w/ 4 3/4" bit & tbq. Drill out cmt & test. Drill CIBP @ 8085, TOH
8. TIH w/pkr and tbq. Set pkr@ 8070.
9. Squeeze Bone Spring perforations from 8135-8585 until a squeeze pressure is attained. TOH
10. TIH w/ 4 3/4" bit, drill collars and 2 7/8" drill pipe. Deepen to lower part of the 2nd Bone Spring.
11. TOH. Log open hole interval.
12. Run 3 1/2" 10.2 lb/ft J-55 EUE tbq to TD.
13. Cmt. w/ 200 sx Permian Pozmix w/ 6 lbs salt / sx and .75% CFR \_ 3. (total volume = 230 cu. ft.)
14. Run cmt. bond log and perforate appropriately.
15. Treat per recommendations of service personnel.

(Please see attachment.)

DECLINED  
**DENIED**

Does not meet Onshore Order 2  
III. B. Minimum Clearance of 0.42  
Casing Clearance

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

David L. Henderson

Title President

Signature

David L. Henderson

Date 08/05/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Charles Nimmer

Petroleum Engineer

Title

Date

8/4/2015

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

BLM - 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)

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Sundry Notice  
Form 3160-5  
Page 2

3 1/5" tbg. Properties  
Collapse pressure 8330  
 $9800' \times .052 \times 9.0 = 4586.4 \text{ psi}$   
Factor of safety – 1.82  
Burst pressure 7950  
 $9800' \times .052 \times 9.0 = 4586.4 \text{ psi}$   
Factor of safety = 1.73  
Internal yield pressure 127,250  
 $9800' \times 10.2 \text{ lb/ft} = 99960 \text{ lbs.}$   
Factor of safety = 1.27