Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

NMOCD Hobbs

FORM APPROVED

OMB No. 1004-0137 Expires: July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Expires. July 31, 2010	
5. Lease Serial No.	
NMNM-124658	
6. If Indian, Allottee or Tribe Name	

abandone	d well. Use	e Form 3160-3 (/	APD) for su	ch proposal	SOCD		
	SUBMIT IN T	7. If Unit of CA/Agreen	nent, Name and/or No.				
1. Type of Well Oil Well	Gas Well	Other		OCT O	9 2015	8. Well Name and No. Casper Federal #1	/
2. Name of Operator	Mack Energy	y Corporation		REC	FIVE	9. API Well No. 30-005-21140	/
3a. Address	THUR DIVING	Острочиной	3b. Phone No.	(include area cod		10. Field and Pool or E	xploratory Area
P.O. Box 960 Ar	tesia, NM 88	3210-0960	(575) 748	-1288		San Andres	
Location of Well (Foots	age, Sec., T.R,M	f, or Survey Description	1)			11. Country or Parish, S	State
346 FNL & 1647 FWL,	Sec. 21 T14S	R30E				Chaves, NM	
	12. CHECK T	HE APPROPRIATE BO	OX(ES) TO IND	ICATE NATURE	OF NO	TICE, REPORT OR OTHE	R DATA
TYPE OF SUBMIS	SION		1	TY	PE OF A	CTION	
Notice of Intent		Acidize	Deep			roduction (Start/Resume)	Water Shut-Off
	1 4	Alter Casing		ure Treat		eclamation	Well Integrity
Subsequent Report		Casing Repair		Construction	FC 23	ecomplete	Other
		Change Plans .		and Abandon	-	emporarily Abandon	
Final Abandonment	lotice	Convert to Injection	Plug	Back	L w	ater Disposal	
proval of this T&A en		gust 8, 2015. At this		requesting an	extensi	Stand -	this work completed.
14. I hereby certify that the	foregoing is true	and correct. Name (Print-	ed/Typed)			- A	
lerry W. Sherrell				Title Producti	on Cler	·k	DONED /
Signature Vers	y W.	Shervell		Date 9/30/15		API	RUNED/
	4	THIS SPACE	FOR FEDE	RAL OR STA	ATE OF	FFICE USE OCT	/ 5 \20 7 5,
Approved by				Title		BALAG	Xmosm
Conditions of approval, if an hat the applicant holds legal intitle the applicant to condu	or equitable title	to those rights in the subje	es not warrant or o	ertify		CARLSBA	AD HELD OFFICE
Title 18 U.S.C. Section 1001 fictitious or fraudulent staten					d willfull	y to make to any department of	or agency of the United States any
(Instructions on page 2)		and the same of the	janaarutto			/	ENTERED IN

MGB/OCD 10/13/2015

OCT 1 5 2015 AFMSS