| Notice of Intent       Alter Casing       Fracture Treat       Recl         Subsequent Report       Casing Repair       New Construction       Recc         Final Abandonment Notice       Change Plans       Plug and Abandon       Tem   | uction (Start/Resume)       Image: Water Shut-Off         amation       Image: Water Shut-Off         amplete       Image: Water Shut-Off         porarily Abandon       Image: Water Shut-Off  |
|--|---|
| Do not use this form for proposals to drill or to re-enter an<br>abandoned well. Use form 3160-3 (APD) for such proposals.     SUBMIT IN TRIPLICATE - Other instructions on reverse side.     Type of Well     Oil Well Gas Well Other     Contact: CLAY HOUSTONEDES OCD     SHACKELFORD OIL COMPANY E-Mail: CHOUSTON92083@YAHOO.COM     Contact: CLAY HOUSTONEDES OCD     SHACKELFORD OIL COMPANY E-Mail: CHOUSTON92083@YAHOO.COM     Contact: CLAY HOUSTONEDES OCD     SHACKELFORD OIL COMPANY E-Mail: CHOUSTON92083@YAHOO.COM     Contact: CLAY HOUSTONEDES OCD     SHACKELFORD OIL COMPANY E-Mail: CHOUSTON92083@YAHOO.COM     Contact: CLAY HOUSTONBES OCD     SHACKELFORD OIL COMPANY E-Mail: CHOUSTON92083@YAHOO.COM     Contact: CLAY HOUSTON92083@YAHOO.COM     Sa. Address     203 WEST WALL SUITE 200     MIDLAND, TX 79701     Location of Well (Footage, Sec., T., R., M., or Survey Description)     Sec 29 T19S R32E NWNE 990FNL 1900FEL     I2. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE,     TYPE OF SUBMISSION   | 6. If Indian, Allottee or Tribe Name         6. If Indian, Allottee or Tribe Name         7. If Unit or CA/Agreement, Name and/or No.<br>NMNM94514X         8. Well Name and No.<br>LUSK WEST DELAWARE UNIT 902         9. API Well No.<br>30-025-30329-00-S1         10. Field and Pool, or Exploratory<br>LUSK         11. County or Parish, and State<br>LEA COUNTY, NM         REPORT, OR OTHER DATA         Muction (Start/Resume)       Water Shut-Off<br>Well Integrity         amation       Well Integrity         mplete       Other         porarily Abandon       Other |
| 1. Type of Well       Gas Well       Other         2. Name of Operator       Contact:       CLAY HOUSTONBBS OCD         3HACKELFORD OIL COMPANY       E-Mail: CHOUSTON92083@YAHOO.COM         3a. Address       3b. Phone No. (includeparen code)         203 WEST WALL SUITE 200       Ph: 432-682-9784         MIDLAND, TX 79701       3b. Phone No. (includeparen code)         4. Location of Well       (Footage, Sec., T., R., M., or Survey Description)         Sec 29 T19S R32E NWNE 990FNL 1900FEL       RECEIVED         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE,         TYPE OF SUBMISSION       TYPE OF ACTION         Ontice of Intent       Acidize       Deepen       Prod         Alter Casing       Fracture Treat       Recel         © Subsequent Report       Change Plans       Plug and Abandon       Tem         © Convert to Injection       Plug Back       Wata         13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of an If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BLA. Required following completion of the involved operations. If the operation of the involved operations.   | NMNM94514X         8. Well Name and No.<br>LUSK WEST DELAWARE UNIT 902         9. API Well No.<br>30-025-30329-00-S1         10. Field and Pool, or Exploratory<br>LUSK         11. County or Parish, and State<br>LEA COUNTY, NM         REPORT, OR OTHER DATA         Muction (Start/Resume)         Banation         Well Integrity         mplete         Other         porarily Abandon  |
| Coil Well Gas Well Other      Aname of Operator     SHACKELFORD OIL COMPANY     E-Mail: CHOUSTON92083@YAHOO.COM      Contact: CLAY HOUSTONBES OCCO     E-Mail: CHOUSTON92083@YAHOO.COM      Contact: CLAY HOUSTONBES OCCO     SHACKELFORD OIL COMPANY     E-Mail: CHOUSTON92083@YAHOO.COM      Contact: CLAY HOUSTONBES OCCO     Subsequent Report     Ph: 432-682-9784      Contact: CLAY HOUSTONBES OCCO     Subsequent Report     Alter Casing     Fracture Treat     Recel     Casing Repair     New Construction     Recect     Contect: CLAY HOUSTONBES     Contact: CLAY HOUSTONBES     CONTICE,     TYPE OF SUBMISSION     TYPE OF ACTION     Alter Casing     Fracture Treat     Recel     Casing Repair     New Construction     Recect     Contect: Clay HOUSTON Plug Back     Wata      Abandonment Notice     Contect to Injection     Plug Back     Wata   | LUSK WEST DELAWARE UNIT 902         9. API Well No.         30-025-30329-00-S1         10. Field and Pool, or Exploratory         LUSK         11. County or Parish, and State         LEA COUNTY, NM         REPORT, OR OTHER DATA         uction (Start/Resume)         amation         Well Integrity         wplete         Other         porarily Abandon  |
| 2. Name of Operator<br>SHACKELFORD OIL COMPANY         Contact:<br>E-Mail: CHAY HOUSTON BBS OCD<br>E-Mail: CHOUSTON 92083@YAHOO.COM           3a. Address<br>203 WEST WALL SUITE 200<br>MIDLAND, TX 79701         3b. Phone No. (include area code)<br>Ph: 432-682-9784         14 Z016           4. Location of Well         (Footage, Sec., T., R., M., or Survey Description)<br>Sec 29 T19S R32E NWNE 990FNL 1900FEL         RECEIVED           12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE,<br>TYPE OF SUBMISSION         TYPE OF ACTION           Image: Notice of Intent         Acidize         Deepen         Prod           Image: Subsequent Report         Casing Repair         New Construction         Recc           Image: Final Abandonment Notice         Change Plans         Plug and Abandon         Tem           If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required following completion of the work will be performed or provide the Bond No. on file with BLM/BIA. Required following completion of the work will be performed or provide the Bond No. on file with BLM/BIA. Required following completion of the work will be performed or provide the Bond No. on file with BLM/BIA. Required following completion of the involved operations.  | 30-025-30329-00-S1         10. Field and Pool, or Exploratory         LUSK         11. County or Parish, and State         LEA COUNTY, NM         REPORT, OR OTHER DATA         Nuction (Start/Resume)         B Water Shut-Off         amation         Well Integrity         mplete         Other         porarily Abandon  |
| MIDLAND, TX 79701         4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 29 T19S R32E NWNE 990FNL 1900FEL       RECEIVED         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE,<br>TYPE OF SUBMISSION         TYPE OF SUBMISSION         OF ACTION         Image: Notice of Intent       Acidize       Deepen       Prod         Image: Subsequent Report       Alter Casing       Fracture Treat       Recc         Image: Subsequent Report       Change Plans       Plug and Abandon       Tem         Image: Subsequent Report       Convert to Injection       Plug Back       Wate         I3. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of an If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required of portion of the involved operations. If the operation recompletion or file with BLM/BIA. Required following completion of the involved operations. If the operation recompletion or file with BLM/BIA. Required to prove the Bond No. on file with BLM/BIA. Required to prove the Bond No.  | LUSK 11. County or Parish, and State LEA COUNTY, NM REPORT, OR OTHER DATA Ution (Start/Resume) amation Well Integrity mplete Other porarily Abandon   |
| 4. Location of Well       (Footage, Sec., T., R., M., or Survey Description)         Sec 29 T19S R32E NWNE 990FNL 1900FEL         RECEIVED         12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE,         TYPE OF SUBMISSION         Notice of Intent         Notice of Intent       Acidize       Deepen       Prod         Subsequent Report       Alter Casing       Fracture Treat       Recc         Final Abandonment Notice       Change Plans       Plug and Abandon       Tem         13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of an If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required of pollowing completion of the involved operations. If the operation results in a multiple completion or completion or completion or recompletion or provide the Bond No.  | LEA COUNTY, NM<br>REPORT, OR OTHER DATA<br>uction (Start/Resume) Ukater Shut-Off<br>amation Ukater Shut-Off<br>Burgete Other<br>porarily Abandon  |
| TYPE OF SUBMISSION       TYPE OF ACTION         Notice of Intent       Acidize       Deepen       Prod         Subsequent Report       Alter Casing       Fracture Treat       Recl         Final Abandonment Notice       Change Plans       Plug and Abandon       Tem         Convert to Injection       Plug Back       Wate         13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of an If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required of pollowing completion of the involved operations. If the operation resoults in a multiple completion or recompletion or the involved operation is not be performed or provide the Bond No.  | uction (Start/Resume)       Image: Water Shut-Off         amation       Image: Water Shut-Off         amplete       Image: Water Shut-Off         porarily Abandon       Image: Water Shut-Off  |
| <ul> <li>Notice of Intent</li> <li>Notice of Intent</li> <li>Acidize</li> <li>Deepen</li> <li>Prod</li> <li>Alter Casing</li> <li>Fracture Treat</li> <li>Recl</li> <li>Casing Repair</li> <li>New Construction</li> <li>Recc</li> <li>Change Plans</li> <li>Plug and Abandon</li> <li>Tem</li> <li>Convert to Injection</li> <li>Plug Back</li> <li>Wate</li> <li>Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of an If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required following completion of the involved operations. If the operation results in a multiple completion or completion in the involved operation.</li> </ul>  | uction (Start/Resume)    amation    Water Shut-Off    Well Integrity    omplete    orarily Abandon  |
| <ul> <li>Notice of Intent</li> <li>Notice of Intent</li> <li>Alter Casing</li> <li>Fracture Treat</li> <li>Recl</li> <li>Casing Repair</li> <li>New Construction</li> <li>Recl</li> <li>Casing Repair</li> <li>New Construction</li> <li>Recl</li> <li>Change Plans</li> <li>Plug and Abandon</li> <li>Tem</li> <li>Convert to Injection</li> <li>Plug Back</li> <li>Wate</li> </ul>   | amation 🖸 Well Integrity mplete 🖸 Other porarily Abandon  |
| If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true<br>Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required<br>following completion of the involved operations. If the operation results in a multiple completion or recompletion or   | er Disposal   |
| determined that the site is ready for final inspection.)<br>8/11/2014 - RAN CEMENT BOND LOG<br>8/12/2014 - GIH TAGGED BOTTOM AT 7059'<br>8/15/2014 - PUMPED 25 SX PLUG FROM 7090' POOH W/ TBG<br>8/18/2014 - TAGGED CEMENT @ 6880' WITNESSED BY PAT MCKELVEY OF BLM, POOH<br>8/21/2014 - PU CIBP SET @ 6370'<br>8/22/2014 - PUMPED 25 SX PLG @ 6370'<br>8/23/2014 - GIH TAGGED PLUG AT 6167'. 202' OF CEMENT ON TOP OF CIBP WITNESSEI<br>PERFORATE<br>4654-4660<br>4706-4714<br>4722-4730<br>4750-4760   | a new interval, a Form 3160-4 shall be filed once<br>tion, have been completed, and the operator has<br>W/ TBG  |
| 14. I hereby certify that the foregoing is true and correct.<br>Electronic Submission #272014 verified by the BLM Well Informat<br>For SHACKELFORD OIL COMPANY, sent to the Hobbs<br>Committed to AFMSS for processing by LINDA JIMENEZ on 11/20/2014  | ion System<br>(14CRW0142SE)   |
| Name (Printed/Typed) DON SHACKELFORD Title PRESIDENT   | and a second  |
| Signature (Electronic Submission) Date 10/20/2014  |   |
| THIS SPACE FOR FEDERAL OR STATE OFFICE   | USE   |
| Approved By /S/ DAVID R. GLASS   | Date  |
| Conditions of approval, if any, are attached Approval of this notice does not warrant or ertify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.  | Ka  |
| 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 States any false, ficting as predeting the statements of the statement o | make to any department or agency of the United  |
| ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVIS  |   |

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## Additional data for EC transaction #272014 that would not fit on the form

## 32. Additional remarks, continued

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4803-4816 GIH W/ PACKER AND PLUG SET PLUG AT 4850' 8/24/2014 - PLUG AT 4850' PKR @ 4534 PUMPED WTR TESTED. ACIDIZE @ 5 BPM @ 2200 PSI ISIP 1800 PSI 15 MINS 800 PSI. RU TO SWAB, SWABBED WELL DRY REC 20 BBLS. MADE HOURLY RUN 500' FL ENTRY RECOVERED TL OF 75 BBLS. 8/25/2014 - OPENED WELL 0 PSI. FLUID LEVEL AT 3800'. PULLED OUT OF HOLE. SD WAIT ON FRAC JOB