

Operator Copy

RECEIVED DEC 31 2014

Form 3160-5
(March 2012)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM 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.
SHL:NM-84902 BHL:NM-54432

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
Read and Stevens, Inc.

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

8. Well Name and No.
North Lea 3 Fed Com #1H9. API Well No.
30-025-420803a. Address
400 N. Pennsylvania Ave #1000
Roswell, NM 88201

3b. Phone No. (include area code)

575-622-3770

10. Field and Pool or Exploratory Area
Quail Ridge, Bone Spring, South4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SHL: 200' FNL & 950' FEL of Section 3, T20S, R34E
BHL: 330' FSL & 350' FEL of Section 3, T20S, R34E11. County or Parish, State
Lea County, New Mexico

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 checked="" 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 checked="" 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/BJA. 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.)

Read & Stevens, Inc. proposes to change the production casing from 5.5" to a tapered 7" crossed over to 5.5". Cement volumes will be adjusted accordingly.

Currently the plan has 8.5" hole with 5.5" 17#, P-110, BTC casing being set at 15385.9'

Proposing to have 6.5" hole with 5.5" 17#, P-110, GBGD(Semi-Premium Thread) casing from 15385.9' to 7" crossover at 10310'. 7" 26#, P-110, GBGD(Semi-Premium Thread) set at 10307'(above 3ft cross over) to surface.

SEE ATTACHED FOR
CONDITIONS OF APPROVAL14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Adolfo Cruz

Title Drilling Engineer

Signature

Date 11/12/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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)

MAR 29 2016

North Lea 3 Fed Com #1H Cement Revisions

Date	No. Sz	Yield (cuft/sk)	Vol. (cuft)	Csg. O.D. (in)	Top (MD ft)	Bottom (MD ft)	Description	Comments
	712	1.75	1,246	13.375	0	1,450		120' Lead casing in conductor with no excess 126.7cuft 22.6bbbls 1330' Lead casing in open hole with 100% excess 1120 cuft 200 bbls
	166	1.35	224	13.375	1,450	1,750		300' Tail casing in open hole with 100% excess 187.9cuft 33.5bbbls 40' Tail in shoe track with no excess 34.7cuft 6.2bbbls
	1,455	1.73	2,517	9.625	0	5,090		1750' Lead casing in casing with no excess 635 cuft 113 bbls 3340' Lead casing in open hole with 80% excess 1883 cuft 336 bbls
	224	1.34	300	9.625	5,090	5,590		500' Tail casing in open hole with 80% excess 281.9cuft 50.2bbbls 40' Tail shoe track with no excess 17cuft 3bbbls
	749	2.38	1,783	7.000	0	10,310		5590' Lead cement in casing with no excess 685 cuft 158 bbls 4720' Lead cement in open hole with 50% excess 898 cuft 160 bbls
	78	2.38	186	5.500	10,310	10,850		540' Lead cement in open hole with 50% excess 185 cuft 33.05 bbls
	760	1.64	1,246	5.500	10,850	15,385		4635' Tail Cement in open hole with 20% excess 1274 cuft 227 bbls 84'tail shoe track with no excess 7.3 cuft 1.3 bbls

12/31/2014

Probaris SP - Print Form Instance

Form 3160-5
(August 2007)UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

12/31

Bold* fields are required.

Section 1 - Completed by Operator	
1. BLM Office* Hobbs, NM	2. Well Type* OIL
3. Submission Type* <input type="radio"/> Notice of Intent <input checked="" type="radio"/> Subsequent Report	4. Action* Well Spud
Operating Company Information	
5. Company Name* READ AND STEVENS, INC	
6. Address* 400 N. PENNSYLVANIA AVE #1000 ROSWELL NM 88201	7. Phone Number* 575-622-3770
Administrative Contact Information	
8. Contact Name* ADOLFO E CRUZ	9. Title* ENGINEER
10. Address* 3401 E. UNIVERSITY DR. UNIT #302 DENTON TX 76208	11. Phone Number* 972-876-2160 12. Mobile Number 972-876-2160
13. E-mail* adolfo.cruz@mojoenergy.com	14. Fax Number
Technical Contact Information	
<input checked="" type="checkbox"/> Check here if Technical Contact is the same as Administrative Contact.	
15. Contact Name*	16. Title*
17. Address*	18. Phone Number*
	19. Mobile Number
20. E-mail*	21. Fax Number
Lease and Agreement	
22. Lease Serial Number*	

NMNM84651

24. If Unit or CA/Agreement, Name and/or Number

25. Field and Pool, or Exploratory Area*
QUAIL RIDGE, BONE SPRING

County and State for Well

26. County or Parish, State*

LEA COUNTY NM

Associated Well Information

27. Specify well using one of the following methods:

- a) Well Name, Well Number, API Number, Section, Township, Range, Qtr/Qtr, N/S Footage, E/W Footage
b) Well Name, Well Number, API Number, Latitude, Longitude, Metes & Bounds description

Well Name*

NORTH LEA 3 FED COM

Well Number*

#1H

API Number

30-025-42080

Section

3

Township

20S

Range

34E

Meridian

NEW MEXICO PRINCIPAL

Qtr/Qtr

NENE

N/S Footage

200 FNL

E/W Footage

350 FEL

Latitude

32.609482

Longitude

103.548026

Metes and Bounds

28. 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 markers and zones. Attach the Bond under which the work will be performed or provide the Bond Number on file pertinent with BLM/BIA. Required subsequent reports shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

SPUD DATE: 12/08/2014

I hereby certify that the foregoing is true and correct.

29. Name*

ADOLFO E CRUZ

30. Title

ENGINEER

31. Date* (MM/DD/YYYY)

12/31/2014

32. Signature*

You have the ability to sign this form only if a SmartCard or digital certificate has been issued to you.

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.

Section 2 - System Receipt Confirmation

33. Transaction

34. Date Sent

35. Processing Office

Section 3 - Internal Review #1 Status

36. Review Category

37. Date Completed

38. Reviewer Name

39. Comments

Section 4 - Internal Review #2 Status

40. Review Category

41. Date Completed

42. Reviewer Name

43. Comments

Section 5 - Internal Review #3 Status

44. Review Category

45. Date Completed

46. Reviewer Name

47. Comments

Section 6 - Internal Review #4 Status

48. Review Category

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50. Reviewer Name

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BUREAU OF LAND MANAGEMENT12/31
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Operating Company Information	
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<input checked="" type="checkbox"/> Check here if Technical Contact is the same as Administrative Contact.	
15. Contact Name* _____	16. Title* _____
17. Address* _____ _____ _____	18. Phone Number* _____ 19. Mobile Number _____
20. E-mail* _____	21. Fax Number _____
Lease and Agreement	
22. Lease Serial Number* _____	

NMNM84651

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QUAIL RIDGE, BONE SPRING

County and State for Well

26. County or Parish, State*

LEA COUNTY NM

Associated Well Information

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- a) Well Name, Well Number, API Number, Section, Township, Range, Qtr/Qtr, N/S Footage, E/W Footage
b) Well Name, Well Number, API Number, Latitude, Longitude, Metes & Bounds description

Well Name*

NORTH LEA 3 FED COM

Well Number*

#1H

API Number

30-025-42080

Section

3

Township

20S

Range

34E

Meridian

NEW MEXICO PRINCIPAL

Qtr/Qtr

NENE

N/S Footage

200 FNL

E/W Footage

350 FEL

Latitude

32.609482

Longitude

103.548026

Metes and Bounds

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North Lea 3 Fed Com 1H Surface Casing subsequent sundry report.

✓ 12/11/2014- Drilled 16" hole to section TD at 1766ftMD. Ran 42 jnts. 13 3/8" 54.5 #, J-55 casing to 1766ftMD.

12/12/2014- Cement surface, Lead 19Bbbs, 70 SX Class C 14.40 wt, 1.55 Yield, Additives Class C+10% Gypsum'+5# Kol-seal, Middle 222Bbbs, 712Sx Class C 13.50Wt, 1.75 Yield, Additives +4% Bentonite'+2% Cacl2+0.25#Cello-flake, Tail- 39Bbbs, 166Sx, Class C 14.80Wt, 1.33 Yield. Additives +1% Cacl2, Bumped plug @ 1400 psi, no cement to surface. Wait on cement for 7hrs than ran temp log which read TOC at 208ft. Rigged up cementers, run 1" tag, @ 125', Cement 100sx 23bbbs, 14.80 wt yield 1.33 Class C Neat. Wait on cement for 4hrs. Re-run 1" tag, @ 32', Cement 2nd stage, 63 sxs, 15bbbs, class C neat and got cement to surface.

I hereby certify that the foregoing is true and correct.

29. Name*

ADOLFO E CRUZ

30. Title

ENGINEER

31. Date* (MM/DD/YYYY)

12/31/2014 Today

32. Signature*

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Section 3 - Internal Review #1 Status

36. Review Category

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Section 4 - Internal Review #2 Status

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Section 5 - Internal Review #3 Status

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Section 6 - Internal Review #4 Status

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SUNDRY NOTICES AND REPORTS ON WELLS

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3. Submission Type* <input type="radio"/> Notice of Intent <input checked="" type="radio"/> Subsequent Report	4. Action* Plug-Back
Operating Company Information	
5. Company Name* READ AND STEVENS, INC	
6. Address* 400 N. PENNSYLVANIA AVE #1000 ROSWELL NM 88201	7. Phone Number* 575-622-3770
Administrative Contact Information	
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12. Mobile Number 972-876-2160	13. E-mail* adolfo.cruz@mojoenergy.com
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Lease and Agreement	
22. Lease Serial Number*	

NMNM84651

24. If Unit or CA/Agreement, Name and/or Number

25. Field and Pool, or Exploratory Area*
QUAIL RIDGE, BONE SPRING

County and State for Well

26. County or Parish, State*

LEA COUNTY NM

Associated Well Information

27. Specify well using one of the following methods:

- a) Well Name, Well Number, API Number, Section, Township, Range, Qtr/Qtr, N/S Footage, E/W Footage
b) Well Name, Well Number, API Number, Latitude, Longitude, Metes & Bounds description

Well Name* NORTH LEA 3 FED COM		Well Number* #1H	API Number 30-025-42080
Section 3	Township 20S	Range 34E	Meridian NEW MEXICO PRINCIPAL
Qtr/Qtr NENE	N/S Footage 200 FNL		E/W Footage 350 FEL
Latitude 32.609482	Longitude 103.548026	Metes and Bounds	

28. Describe Proposed or Completed Operation

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North Lea 3 Fed Com 1H Cement Plug Sundry

12/15/2014- Drilled to 2736ftMD and POOH to pump cement plug due to hole deviation.

12/16/2014-Cement 500' plug @ 2236', Pump 415 sx of Class C, 17#, Yield- 0.99, Additives +1.2%cd-37. 10.5hrs WOC. Tag Top of cement at 2295ftMD.

I hereby certify that the foregoing is true and correct.

29. Name*

ADOLFO E CRUZ

30. Title

ENGINEER

31. Date* (MM/DD/YYYY)

12/31/2014 Today

32. Signature*

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DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT11/5/2015 **SUNDRY NOTICES AND REPORTS ON WELLS**

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Administrative Contact Information	
8. Contact Name* ADOLFO E CRUZ	9. Title* ENGINEER
10. Address* 3401 E. UNIVERSITY DR. UNIT #302 DENTON TX 76208	11. Phone Number* 972-876-2160 12. Mobile Number 972-876-2160
13. E-mail* adolfo.cruz@mojoenergy.com	14. Fax Number
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Lease and Agreement	
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NMNM84651

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QUAIL RIDGE, BONE SPRING

County and State for Well

26. County or Parish, State*

LEA COUNTY NM

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NORTH LEA 3 FED COM

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API Number

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12/21/2014- Drill 12.25" hole to 5607ftMD; Run 143jts 9 5/8" 40# L-80 LTC casing to 5607ftMD

12/22/2014- Pump 20bbls Spacer ahead. Pump 500bbls Lead Cement(12.6ppg/ 36/65 Poz/C+6% Bentonite+.3% fl-16+.2% r-20+.1% cd-35+ .25#cello-flake+5%salt)

Pump 67bbls Tail cement(14.8ppg/ Class C+.25#cello-flake).Displaced with 414 bbls fresh water. No cement to surface. BLM notified and requested cement bond log ran. 2268 Secs

Run cement bond log. TOC reported at 1760ft. Ran 770ft 1" pipe and pumped 200sx Class C cement. WOC

12/23/2014 - Attempted to Cement Down Backside, Pump Truck Pressured up to 1500. Wash out stack with Fresh Water PSI. R/U & Run Cement Bond Logs Down to 2200 Ft, Top Of Cement @ 200'.Management talked with BLM & approved moving forward with operations

I hereby certify that the foregoing is true and correct.

29. Name*
ADOLFO E CRUZ

30. Title
ENGINEER

31. Date* (MM/DD/YYYY)
01/05/2015

32. Signature*
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Form 3160-5
(August 2007)

1/26/15
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BUREAU OF LAND MANAGEMENT

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Lease and Agreement

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NMNM84651

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Well Name*

NORTH LEA 3 FED COM

Well Number*

1H

API Number

30-025-04208

Section

3

Township

20S

Range

34E

Meridian

NEW MEXICO PRINCIPAL

Qtr/Qtr

NENE

N/S Footage

200 FNL

E/W Footage

350 FEL

Latitude

32.609482

Longitude

103.548026

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01/07/2015 Drill 8.75" hole section to TD @15560ftMD.

01/08/2015 Rigged up wireline tools and ran open hole logs

01/09/2015 Ran 7"/5.5" tapered Production casing to 1550ftMD; 103 jts 5.5" 17# P-110 GBCD, 237 jts 7" 26# P-110, GBCD; 38 NCS port sleeves ran from top of first sleeve at 11107.73ftMD to bottom of last sleeve at 15422.5ftMD.

01/10/2015 Pump Lead Cement- 1192 sx 50/50 Poz/H+10%bentonite+5%fl-16+.3%R-20+.1%cd-35+.25#celflake=5%salt

Pumped Middle Cement-902 sks Class C star bond+.55%fl-16+.3%fl-15+.1%AS-3+.4%R-20+.25#celflake

Pumped Tail Cement- 100 sks; Class Cstar bond+.55%fl-16+.5%fl-15+.5%as-3+.5%R-20+.3%TSM-1+.25#celflake

Drop plug @ 06:30, Displaced-10bbbls sugar water followed by 503bbbls freshwater. Plug not bumped. Notified BLM and directed to run Temp log. Log found TOC @ 1726ft.

First Take Point:10651ftMD/10632ft TVD; 330FNL/367FEL Section 3 T20S R34E

Last Take Point:15425ftMD/11007ft TVD; 330FSL/370FEL Section 3 T20S R34E

Spud Date:12/08/2014

Rig Release Date:01/11/2015

I hereby certify that the foregoing is true and correct.

29. Name*

ADOLFO E CRUZ

30. Title

ENGINEER

31. Date* (MM/DD/YYYY)

01/26/2015

32. Signature*

You have the ability to sign this form only if a SmartCard or digital certificate has been issued to you.

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.

Section 2 - System Receipt Confirmation

33. Transaction

34. Date Sent

35. Processing Office

Section 3 - Internal Review #1 Status

36. Review Category

37. Date Completed

38. Reviewer Name

39. Comments

Section 4 - Internal Review #2 Status

40. Review Category

41. Date Completed

42. Reviewer Name

43. Comments

Section 5 - Internal Review #3 Status