

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010**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.**

HOBBS OCD

APR 18 2016

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM 106916
2. Name of Operator Regeneration Energy Corp. <input checked="" type="checkbox"/>		6. If Indian, Allottee or Tribe Name
3a. Address PO Box 210 Artesia NM 88210	3b. Phone No. (include area code) 575 736 3535	7. If Unit of CA/Agreement, Name and/or No.
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: 190 FSL 1862 FWL Unit Letter N Sec. 31 T22S R32E		8. Well Name and No. E. Livingston 31 Federal #7H <input checked="" type="checkbox"/>
		9. API Well No. 30-025-42975
		10. Field and Pool or Exploratory Area Sand Dunes; Bone Spring
		11. Country 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 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 checked="" 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 checked="" type="checkbox"/> Other <u>Water Disposal</u>
	<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.)

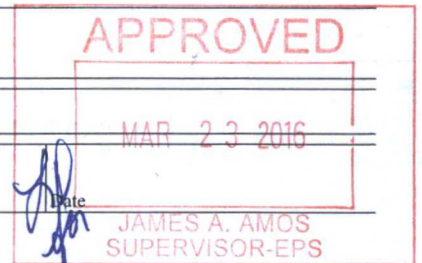
Regeneration is disposing the produced water from the above referenced well in the OCD approved Silverton 31 Federal #1 (API: 30-025-32093) located in Sec. 22 T25S R32E. The water is transported by pipeline.

31 T22SR32E
Thanks

SWD-904

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) William Miller		Title Landman
Signature		Date 03/12/2016
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)

MAY 06 2016

District I
1625 N. French Dr., Hobbs, NM 88240
District II
811 S. First St., Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources

Oil Conservation Division
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-104
Revised August 1, 2011

HOBBS OCD

APR 18 2016

RECEIVED

Submit one copy to appropriate District Office

☐ AMENDED REPORT

I. REQUEST FOR ALLOWABLE AND AUTHORIZATION TO TRANSPORT

¹ Operator name and Address Regeneration Energy Corp. ✓ P.O. Box 210 Artesia NM 88210		² OGRID Number 280240 ✓
		³ Reason for Filing Code/ Effective Date NW
⁴ API Number 30 - 025-42975 ✓	⁵ Pool Name Sand Dunes; Bone Spring	⁶ Pool Code 53800
⁷ Property Code 40023	⁸ Property Name E Livingston 31 Federal ✓	⁹ Well Number 7H ✓

II. ¹⁰ Surface Location

UL or lot no. N	Section 31	Township 22-S	Range 32-E	Lot Idn	Feet from the 190	North/South Line South	Feet from the 1862	East/West line West	County LEA ✓
--------------------	---------------	------------------	---------------	---------	----------------------	---------------------------	-----------------------	------------------------	-----------------

¹¹ Bottom Hole Location

UL or lot no. C	Section 31	Township 22-S	Range 32-E	Lot Idn	Feet from the 333	North/South line North	Feet from the 1859	East/West line West	County LEA
¹² Lse Code F	¹³ Producing Method Code F	¹⁴ Gas Connection Date n/a	¹⁵ C-129 Permit Number	¹⁶ C-129 Effective Date	¹⁷ C-129 Expiration Date				

III. Oil and Gas Transporters

¹⁸ Transporter OGRID	¹⁹ Transporter Name and Address	²⁰ O/G/W
	DCP Midstream 10 Desta Drive, Suite 400W Midland TX 79705	G
	Plains Marketing LP 10 Desta Dr, Suite 200E Midland Tx 79705	O

IV. Well Completion Data

²¹ Spud Date 1/05/2016	²² Ready Date 3/12/16	²³ TD 14918	²⁴ PBTB 14918	²⁵ Perforations 10842-14770	²⁶ DHC, MC N/A
²⁷ Hole Size	²⁸ Casing & Tubing Size	²⁹ Depth Set	³⁰ Sacks Cement		
17 1/2"	13 3/8	880'	409		
12 1/4"	9 5/8	4561'	1075		
7 7/8"	5 1/2	14918'	430		

V. Well Test Data

³¹ Date New Oil 3/12/2016	³² Gas Delivery Date n/a	³³ Test Date 3/12/2016	³⁴ Test Length 24hrs	³⁵ Tbg. Pressure N/A	³⁶ Csg. Pressure 2450#
³⁷ Choke Size 12/64	³⁸ Oil 300	³⁹ Water 1058	⁴⁰ Gas Est. 150		⁴¹ Test Method Flowing

⁴² I hereby certify that the rules of the Oil Conservation Division have been complied with and that the information given above is true and complete to the best of my knowledge and belief.

Signature:

Printed name:
William Miller

Title:
Landman

E-mail Address:
wmiller@pvtm.net

Date:
3/12/2016

Phone: 575 736 3535

Approved by:

Title:

Approval Date:

OIL CONSERVATION DIVISION

OK

DISTRICT I
1625 N. French Dr., Hobbs, NM 88240
Phone (575) 393-6161 Fax (575) 393-0720

DISTRICT II
311 S. First St., Artesia, NM 88210
Phone (505) 748-1283 Fax (505) 748-0720

DISTRICT III
1000 Rio Brazos Road, Aztec, NM 87410
Phone (505) 334-6178 Fax (505) 334-6170

DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, NM 87505
Phone (505) 476-3460 Fax (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, New Mexico 87505

HOBBS OCD

Form C-102

Revised August 1, 2011

APR 18 2016

Submit one copy to appropriate District Office

RECEIVED

AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-025-42975	Pool Code 53800	Pool Name Sand Dunes; Bone Spring
Property Code 40023	Property Name E. LIVINGSTON 31 FEDERAL	Well Number 7H
OGRID No. 280240	Operator Name REGENERATION ENERGY CORPORATION	Elevation 3505'

Surface Location

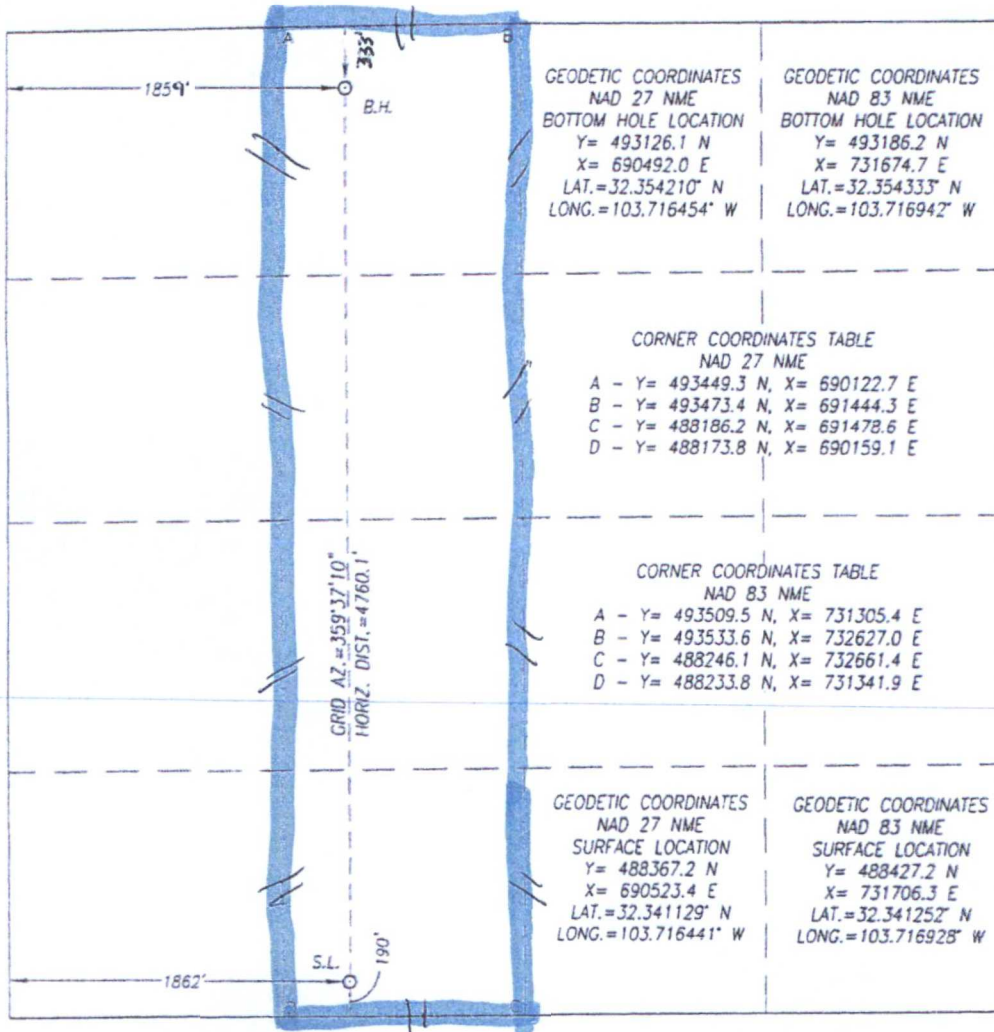
UL or lot No	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
N	31	22-S	32-E		190	SOUTH	1862	WEST	LEA

Bottom Hole Location If Different From Surface

UL or lot No	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
C	31	22-S	32-E		333	NORTH	1859	WEST	LEA

Dedicated Acres 140	Joint or Infill	Consolidation Code	Order No.
-------------------------------	-----------------	--------------------	-----------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION



GEODETIC COORDINATES
NAD 27 NME
BOTTOM HOLE LOCATION
Y = 493126.1 N
X = 690492.0 E
LAT. = 32.354210° N
LONG. = 103.716454° W

GEODETIC COORDINATES
NAD 83 NME
BOTTOM HOLE LOCATION
Y = 493186.2 N
X = 731674.7 E
LAT. = 32.354333° N
LONG. = 103.716942° W

CORNER COORDINATES TABLE
NAD 27 NME

A - Y = 493449.3 N, X = 690122.7 E
B - Y = 493473.4 N, X = 691444.3 E
C - Y = 488186.2 N, X = 691478.6 E
D - Y = 488173.8 N, X = 690159.1 E

CORNER COORDINATES TABLE
NAD 83 NME

A - Y = 493509.5 N, X = 731305.4 E
B - Y = 493533.6 N, X = 732627.0 E
C - Y = 488246.1 N, X = 732661.4 E
D - Y = 488233.8 N, X = 731341.9 E

GEODETIC COORDINATES
NAD 27 NME
SURFACE LOCATION
Y = 488367.2 N
X = 690523.4 E
LAT. = 32.341129° N
LONG. = 103.716441° W

GEODETIC COORDINATES
NAD 83 NME
SURFACE LOCATION
Y = 488427.2 N
X = 731706.3 E
LAT. = 32.341252° N
LONG. = 103.716928° W

OPERATOR CERTIFICATION

I hereby certify that the information herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

[Signature] 3/16/16
Signature Date

William Miller
Printed Name

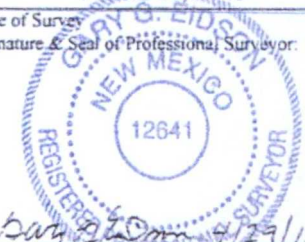
wmiller@putn.net
E-mail Address

SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

APRIL 20, 2015

Date of Survey
Signature & Seal of Professional Surveyor:



Certificate Number
Gary G. Eidson 12641
Ronald J. Eidson 3239

LSL JWSC W.O. 13.11.0497

BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972

HOBBS OCD

APR 18 2016

RECEIVED

Disposal of Produced Water From Federal Wells
Conditions of Approval

Approval of the produced water disposal methodology is subject to the following conditions of approval:

1. This agency shall be notified of any change in your method or location of disposal.
2. Compliance with all provisions of Onshore Order No. 7.
3. This agency shall be notified of any spill or discharge as required by NTL-3A.
4. This agency reserves the right to modify or rescind approval whenever it determines continued use of the approved method may adversely affect the surface or subsurface environments.
5. Any on-lease open top storage tanks shall be covered with a protective cover to prevent entry by birds and other wildlife.
6. This approval should not constitute the granting of any right-of-way or construction rights not granted by the lease instrument.
7. If water is transported via a pipeline that extends beyond the lease boundary, then you need to submit within 30 days an application for right-of-way approval to the Realty Section in this office if you have not already done so.
8. Disposal at any other site will require prior approval.
9. Subject to like approval by NMOCD.

7/10/14