Form 3160-5									
UNITED STATES DEPARTMENT OF THE INTERIOR HOBBS OC BUREAU OF LAND MANAGEMENT					FORM APPROVED OMB No. 1004-0135 Expires July 31, 1996				
SUNDRY NOTICES AND REPORTS ON WELLS DEC bo not use this form for proposals to drill or to re-enter an					5. Lease Serial No. NMNM02218				
abandoned well	l. Use Form 3160-3 (Al	PD) for such propos	als.		6. If Indian, Allot	tee or Tri	be Name		
	ICATE – Other inst	tructions on reve	rse side	,	7. If Unit or CA/A	Agreemen	t, Name and/or No		
1. Type of Well					8. Well Name and	l No.			
Oil Well Gas Well Other Dry					KING DAVIS FED. #3				
2. Name Of Operator					9. API Well No.				
LEGACY RECLAMATION PROJECT / SAM BOREN					30-041-00041				
3a. Address	3b. Phone No. (include area code)			10. Field and Pool, or Exploratory Area					
N/A		N/A				WILDCAT			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State				
SEC. 28, T. 8S., R. 37 E.,	SEC. 28, T. 8S., R. 37 E., SESE				ROOSEVELT, NM				
12. CHECK APP	PROPRIATE BOX(ES)	TO INDICATE NAT	URE OF 1	NOTICE,	REPORT, OR	OTHER	DATA		
TYPE OF SUBMISSION			TYPE OF	ACTION	V				
	Acidize	Deepen		Production	on (Start/Resume) 🔲 Water Shut-Off				
Notice of Intent	Alter Casing	Fracture Treat		Reclamatio	on	<b>N</b>	Vell Integrity		
Subsequent Report	Casing Repair	New Construction	on 🗆	Recomplet	e		other		
	Change Plans	Plug and Abando	on 🗖	Temporari	arily Abandon				
Final Abandonment Notice	Convert to Injection	Plug Back		Water Dis	posal				
13. Described Proposed or Complet thereof. If the proposal is to dee and zones. Attach the Bond un within 30 days following compl shall be filed once testing has be the operator has determined that	epen directionally or recomple der which the work will be p etion of the involved operation en completed. Final Abandon	ete horizontally, give subsu performed or provide the B ons. If the operation result ment Notices shall be filed	rface locatio ond No. on s in a multip	file with B ble completion	sured and true verti- LM/BIA. Required on or recompletion	cal depths l subseque in a new	of all pertinent markers ent reports shall be filed interval, a Form 3160-4		
BLM WILL INTERNAL									
. RECLAMATION WO	RK IS COMPLETE	AND WELL SHOL	JLD BE	CONSI	DERED 'P+A.	,			
14. I hereby certify that the foregoing	ing is true and correct				5.5	1.2	1. 1. 1. 3. C		
Name (Printed/Typed) Title							OLALIOT		
Signature	ORAEST J. MAYER		Date	NAI	URAL RESOUP	ICE SPE	ECIALIST		
Signature	ARIL	7	Jate	11/3	3/16				
quinting	THIS SPACE	FOR FEDERAL OF	STATE	OFFICE	USE				
Approved By	bert Hoskinson		Title	Actin	1-	Date	1/23/16		
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.					Roswell Field Office				
Title 18 U.S.C. Section 1001, makes		winely and willfully to mak	e to any den	artment or	agency of the United	States an	v false, fictitions or		
fraudulent statements or representation			to any dep			No.	, 1000, 10000000 U		

1	Instr	uctions	on	reverse)	)

MW/OCD 12/6/16