

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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. Field Station No.
NMNM68084

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

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

1. Type of Well

☐ Oil Well ☐ Gas Well ☒ Other: INJECTION8. Well Name and No.
STATION SWD 1

2. Name of Operator

MESQUITE SWD INCORPORATED

Contact: MELANIE WILSON

E-Mail: mjp1692@gmail.com

9. API Well No.

30-025-43473-00-X1

3a. Address

CARLSBAD, NM 88221

3b. Phone No. (include area code)

Ph: 575-914-1461

10. Field and Pool or Exploratory Area
SWD

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 7 T24S R32E SENW 2625FNL 2315FWL

11. County 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"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Drilling Operations
	<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.

06/24/18 - Set packer @ 16736'.

06/25/18 - Ran 5-1/2" 23# T95 and 7" 29# P110 tubing to 16736'. Sting into packer. Circ packer fluid.

06/26/2018 - Pressure up backside to 1000# and hold for 30 mins. Good test.

06/27/2018 - Rig released.

07/02/2018 - Pressure test to 500# for 30 mins. Good test (chart attached).

07/03/2018 - Date of first injection.

HOBBS OCD**SEP 13 2018****RECEIVED**

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #427457 verified by the BLM Well Information System

For MESQUITE SWD INCORPORATED, sent to the Hobbs

Committed to AFMSS for processing by DEBORAH MCKINNEY on 08/16/2018 (18DLM0510SE)

Name (Printed/Typed) MELANIE WILSON

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 07/16/2018

THIS SPACE FOR FEDERAL AGENCY USE ONLY

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.

AUG 16 2018

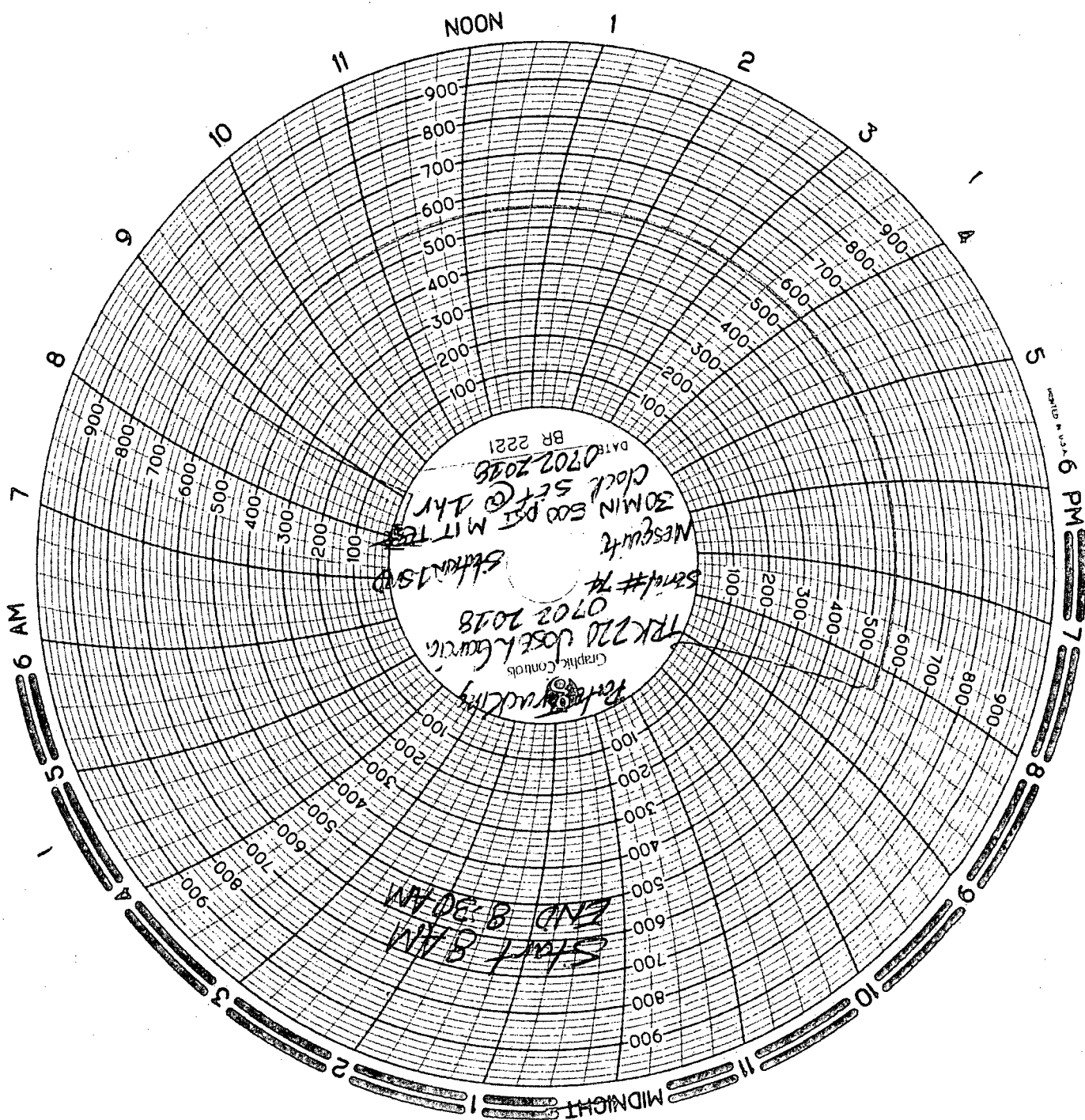
s/ Jonathon Shepard

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 any statement or representation in 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)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****



Calibration Certificate

Company Name: Pate Trucking
Recorder Type: Bristol "
Recorder Serial: # 74

Recorder Pressure Range: 0-1000# Accuracy +/-: 0.2% PSIG
Temperature Range: _____ Deg F.

Increasing Pressure			Decreasing Pressure		
Applied Pressure	Indicated Pressure	Error%	Applied Pressure	Indicated Pressure	Error%
0.0#	0.0#	0	800#	800#	0
100#	100#	0	600#	600#	0
300#	300#	0	400#	400#	0
500#	500#	0	200#	200#	0
700#	700#	0	0.0#	0.0#	0
1000#	1000#	0			

Temperature Test		
Applied Temperature	Indicated Temperature	Error%

Certified Calibration Instrument Used
Gauge: <u>Crystal</u>
Deadweight: _____

Remarks: _____

Calibration Date: 4/25/2018
Technician: Craig Sutherland Craig Sutherland
By FB