Form 3160-5 (June 2015)

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT SPACE
SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to the property of the proposals to drill or to the property of th

abandoned we	II. Use form 3160-3 (APD) for	such firepositis [10]	<b>BB5</b>	6. If Indian, Allottee o		
SUBMIT IN TRIPLICATE - Other instructions on page 2			ALIG 21	16 21 2619 Unit or CA/Agreement, Name and/or No.		
1. Type of Well Other: INJECTION				2 Well-Marme and No.		
Oil Well Gas Well Other: INJECTION  2. Name of Operator Contact: MELANIE WILSON			RECE	9. API Well No.		
MESQUITE SWD INCORPORATED E-Mail: mjp1692@gmail.com				30-025-43328-00-S1		
3a. Address	hone No. (include area code) 575-914-1461	10. Field and Pool or Exploratory Area SWD				
CARLSBAD, NM 88221			11 Courte of Parish	S4-4-		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State		
Sec 6 T22S R32E Lot 3 1105FNL 1480FWL				LEA COUNTY, NM		
12. CHECK THE A	PPROPRIATE BOX(ES) TO IN	DICATE NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION					
☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Producti	on (Start/Resume)	☐ Water Shut-Off	
_	☐ Alter Casing	☐ Hydraulic Fracturing	☐ Reclama	tion	■ Well Integrity	
Subsequent Report	□ Casing Repair	☐ New Construction	☐ Recomplete		□ Other	
☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	☐ Tempora	rily Abandon		
	☐ Convert to Injection	□ Plug Back	■ Water D	isposal		
MIT chart attached.	ssure test to 545 psi for 35 minu	nes. Glart 646psi, erid t	очо раг.			
					•	
14. I hereby certify that the foregoing is	Electronic Submission #469430	NCORFORATED, sent to	the Hobbs	•		
Name (Printed/Typed) MELANIE		ATORY ANA		· ·		
Signature \ (Electronic S	Submission)	Date 06/17/2	019		<del> </del>	
	THIS SPACE FOR FE	DERAL OR STATE	OFFICE US	BE		
Approved By		Title Accep	ted for F	Record	JUL 1 0 2019	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction of t	rant or Jon	athon She	pard			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	U.S.C. Section 1212, make it a crime for statements or representations as to any r	or any person knowingly and natter within its jurisdiction.	willfully to mal	ke to any department or	agency of the United	

DR 8-26-19

(Instructions on page 2)
\*\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\*

FOR RECORD ONLY

Solid Jan Salah

West Grama, Field & SWO#1

Start 50.025-45328

Calibrated by Atthoroper Tanks

Start 50.025-45328

Calibrated by Atthoroper Tanks

Lad - 545 45

Start 50.025-45338

District 2-Artesia Field Office 811 S. 1street Artesia, NM 88210 (Office) 575-748-1283 (Fax) 575-748-9720 Submit 1 Copy

## State of New Mexico EMNRD-OIL CONSERVATION DIVISION

**BRADENHEAD TEST REPORT Operator Name** API Number Mesquite SWD, Inc. 30-025-4332 **Property Name** West Gramma Ki 7. Surface Location N/S Line E/W Line Section Township Range Feet from Feet From County டி 3SE M80 W 1105 £a ما Well Status DATE SHUT-IN INJECTOR **PRODUCER** TA'D Well 6/4/2019 NO YES NO YES INJ SWD OIL GAS **OBSERVED DATA** (B) Interm. (1) (A) Surf-Interm. (C) Interm. (2) (D) Prod Casing (E) Tuhing Pressure Flow Characteristics CO2\_\_\_ Puff Y/ N Y/ N Y / N Y / N WTR\_\_\_ Steady Flow Y/ N Y/ N Y/N Y/ N Y/ N GAS\_ Y/ N Y/ N Surges Y / NIf applicable type Y/ N Y/ N Down to nothing YI/NYI/Nfluid injected for Gas or Oil Y/ N Y/ N Y/ N Y/N Waterflood Water Y/ N Y/ N Y/ N Y / N If Braden head flowed water, check all the descriptions that apply: FRESH SALTY SULFUR BLACK Remarks: Please state for each string (A, B, C, D, E) pertinent information regarding bleed down or continuous build up if applies. Signature: OIL CONSERVATION DIVISION Recorded online: Print name Re-test: Title: E-mail Address: Phone #: Date: Witness: