Form 3160-5 (June 2015)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

SUNDRY Do not use thi abandoned we	5. Lease Serial No. NMLC066126  6. If Indian, Allottee	or Tribe Name			
SUBMIT IN	2020 7. If Unit or CA/Agre	eement, Name and/or No.			
Type of Well     Gas Well □ Ott	8. Well Name and No	FEDERAL COM 4H			
2. Name of Operator CHISHOLM ENERGY OPERA	9. API Well No. 30-025-46349-	00-X1			
3a. Address 801 CHERRY STREET SUITE FORT WORTH, TX 76102	b. Phone No. (include area code) Ph: 817-953-3728 Ext: 372	10. Field and Pool or LEA	10. Field and Pool or Exploratory Area LEA		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)			11. County or Parish,	11. County or Parish, State	
Sec 23 T20S R34E 50FSL 515FWL 32.551426 N Lat, 103.537163 W Lon			LEA COUNTY,	NM	
12. CHECK THE AI	PPROPRIATE BOX(ES) TO	) INDICATE NATURE O	F NOTICE, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION				
☐ Notice of Intent	☐ Acidize	□ Deepen	☐ Production (Start/Resume)	■ Water Shut-Off	
_	☐ Alter Casing	☐ Hydraulic Fracturing	□ Reclamation	■ Well Integrity	
Subsequent Report	□ Casing Repair	■ New Construction	□ Recomplete	Other	
☐ Final Abandonment Notice	☐ Change Plans	□ Plug and Abandon	□ Temporarily Abandon	Change to Original A PD	
	☐ Convert to Injection	□ Plug Back	■ Water Disposal		
Attach the Bond under which the wor	rk will be performed or provide the loperations. If the operation results bandonment Notices must be filed conal inspection.  OCATION  AL COM 2BS	Bond No. on file with BLM/BIAs in a multiple completion or reconly after all requirements, includ	red and true vertical depths of all perticons. Required subsequent reports must be impletion in a new interval, a Form 31 ing reclamation, have been completed	e filed within 30 days 60-4 must be filed once	
Electronic Submission #494562 verified by the BLM Well Information System For CHISHOLM ENERGY OPERATING LLC, sent to the Hobbs Committed to AFMSS for processing by JUANA MEDRANO on 12/11/2019 (20JM0035SE)					
Name (Printed/Typed) JENNIFE		GULATORY ANALYST			
Signature (Electronic Submission) Date 12/04/2019					
	THIS SPACE FOR	FEDERAL OR STATE	OFFICE USE		
Approved_By_CQDY_LAYTON		t warrant or	IT FIELD MANAGER	Date 12/12/2019	
certify that the applicant holds legal or eq which would entitle the applicant to cond	office Hobbs	Office Hobbs			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent			willfully to make to any department o	r agency of the United	

## Additional data for EC transaction #494562 that would not fit on the form

32. Additional remarks, continued

TO: LAGUNA 23 2BS FEDERAL COM