

OCD-ARTESIA

Form 3160-5
(August 2007)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires July 31, 2010

RECEIVED
APR 4 2012
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. Lease Serial No.
NMLC 067849
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
NMNM 84589

2. Name of Operator
Three Rivers Operating Company LLC

8. Well Name and No.
Hondo federal Gas Com #1

3a. Address
10716 Hwy 199, Suite 9, Midland, TX 79707

3b. Phone No. (include area code)
432-296-9594

9. API Well No.
30-015-20937

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
1650' FSL & 2310' FEL, Unit J, Sec 27-T17S-R27E

10. Field and Pool or Exploratory Area
Logan Draw

11. Country or Parish, State
Eddy

12 CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input checked="" 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 type="checkbox"/> Other _____
	<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 recomplate 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 recompletion 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.)

- Three Rivers Operating Company, LLC has contracted Talon/LPE to do reclamation of the closed drilling pit at the Hondo Federal Gas Com #1, an active well location.
- The surface of the closed drilling pit area will be bladed to prepare for the installation of a liner. Rock and debris will be deep buried into the drilling reserve pit area.
- A composite 20 millimeter liner measuring 100-feet long by 80-feet wide will be installed over the center of the closed drilling pit area. The edges of the liner will be keyed a minimum of 2-feet deep into a trench excavated at the boundaries of the closed drilling pit area.
- New soil will transported in from a local borrow pit. A minimum of 2-foot of new soil will be placed over the top of the 20 mil liner and the entire closed drilling pit area, encompassing a total area of 200-feet long by 150-feet wide.
- The soil lift will be contoured to match the surrounding terrain and will be seeded using the recommended BLM seed mixture for the area.
- Erosion control berms will be installed to prevent washout of the reclaimed area.

Downsize location if possible using reclaimed material to cap pit.
Establish diversion at the top of the old pit.

**RECLAMATION
DUE 6-30-12**

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Larry Wood / *Sindy Prescott*

Title *Foreman / Office Manager*
Date 2/24/2012

Signature *Sindy Prescott*

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by *James G. Lewis*

Title *SEAS* Date *3-31-12*

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 *CFD*

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