

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

N.M. OIL CONSERVATION DIVISION

811 S. FIRST STREET  
ARTESIA, NM 88210

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

**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.**

Source Serial No.  
NMNM 0477614

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator  
GUADALUPE OPERATING LLP

3a. Address  
1407 W CUTHBERT  
MIDLAND, TX 79701

3b. Phone No. (include area code)  
(432) 686-8632

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

8. Well Name and No.  
MIDWEST FEDERAL #2

9. API Well No.  
30-005-60464

10. Field and Pool or Exploratory Area  
SAND RANCH MORROW (GAS)

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

1980' FNL & 1980' FEL UNIT G, SEC 23, T10S, R29E

11. Country or Parish, State  
CHAVES, 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"/> Fracture Treat	<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 OPERATOR CHANGE
	<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 recompleate 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.)

AS REQUIRED BY 43 CFR 3100.0-5(a) AND 43 CFR 3162.3 WE ARE NOTIFYING YOU OF A CHANGE OF OPERATOR ON THE ABOVE REFERENCED WELL.

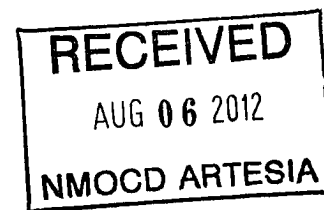
GUADALUPE OPERATING, LLP, AS NEW OPERATOR, ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASE OR PORTION OF LEASE DESCRIBED.

GUADALUPE OPERATING, LLP MEETS FEDERAL BONDING REQUIREMENTS S FOLLOWS (43 CFR 3104):

BOND COVERAGE: STATEWIDE  
BLM BOND FILE NO.: NM 2557  
LETTER OF CREDIT NO.: S1567NIV  
BOND AMOUNT: \$25,000.00

EFFECTIVE DATE OF THIS CHANGE IS MAY 1, 2011

**DENIED**



PRIOR OPERATOR: THREE RIVERS OPERATING Co. LLC

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)

JOHN BREEDLOVE

Title MANAGING PARTNER

Signature

Date 01/20/2012

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

Denied /S/ DAVID R. GLASS

PETROLEUM ENGINEER

Title

Date

JUL 26 2012

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

person knowingly and willfully to make to any department or agency of the United States any false, on

**DENIED! See Sixty (60) Day Letter.**  
**Operator Change Can Not Be Approved**  
**Without Production Of Oil And/Or Gas**  
**In Paying Quantities.**

**ENTERED IN**  
**AFMSS**