

UNITED STATES **NM OIL CONSERVATION**  
DEPARTMENT OF THE INTERIOR **ARTESIA DISTRICT**  
BUREAU OF LAND MANAGEMENT **Artesia**FORM APPROVED  
OMB NO. 1004-0135  
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.*  
**RECEIVED****SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		5. Lease Serial No. FEE
2. Name of Operator TANDEM ENERGY CORPORATION Contact: L. KIKI LOCKETT E-Mail: kiki@t5energy.com		6. If Indian, Allottee or Tribe Name
3a. Address 2700 POST OAK BLVD SUITE 1000 HOUSTON, TX 77056	3b. Phone No. (include area code) Ph: 713-987-7326	7. If Unit or CA/Agreement, Name and/or No. 8910123990
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 5 T18S R29E NWSE Tract 25 1980FSL 1780FEL		8. Well Name and No. BGS AU TRACT #25 4
		9. API Well No. 30-015-20975-00-S1
		10. Field and Pool, or Exploratory LOCO HILLS
		11. County or Parish, and State EDDY COUNTY, NM

**12. CHECK 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 checked="" 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 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Isolated hole in casing between 15? and 31?.

Set RBP At 2000?, filled casing with water and ran CBL to determine TOC.

TOC was located at 1954?.

Perforated the 4-1/2? Casing at 810? (30? below the base of salt) 4 SPF, 4 total holes.

Pumped 250 sx of class C cement. Cement did not return to surface.

Pumped 100 sacks of class C cement got cement returning to surface inside 8-5/8? Surface Casing.

Tagged cement at 15? Drilled to 450?. Pressure tested casing. Pressure leaked off.

Pumped 100 sacks of class C cement.

Tagged cement at 10? drilled down to RBP at 900?.

Tested casing. Pressure leaked off.

RIH with Packer and tested casing to isolate leak.

Leak was found between 15 and 17?.

Any time casing is  
replaced, repaired, or  
cemented an NOI  
is required. This  
was done without  
approval.

Accepted for record  
ED NMOC 11/4/15

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #314291 verified by the BLM Well Information System For TANDEM ENERGY CORPORATION, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 10/23/2015 (16JAS0632SE)</b>	
Name (Printed/Typed) L. KIKI LOCKETT	Title REGULATORY
Signature (Electronic Submission)	Date 08/26/2015
<b>THIS SPACE FOR FEDERAL OR STATE OFFICE USE</b>	
Approved By _____	Title _____
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 _____
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.	

**Additional data for EC transaction #314291 that would not fit on the form**

**32. Additional remarks, continued**

Decision is to dig down to 20' and cut off surface and production casing, and replace with good casing.