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

	Al tesia	5. Lease Serial No.	
ES AND REPORTS ON WELLS		NMNM113944	
F		ł ·	

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.			NMNM113944				
			6. If Indian, Allottee or Tribe Name				
SUBMIT IN TRIPLICATE - Other instructions on page 2			7. If Unit or CA/Agreement, Name and/or No.				
1. Type of Well  ☑ Gas Well ☐ Other				8. Well Name and No. COTTONWOOD 28-33 FED 2BS 2H			
Name of Operator Contact: BETTIE WATSON     CHISHOLM ENERGY OPERATING, LEGMail: bettie@watsonreg.com				9. API Well No. 30-015-43692			
3a. Address 801 CHERRY STREET, SUITE 1200-UNIT 20 FORT WORTH, TX 76102  3b. Phone No. (include area code) Ph: 972-979-0132					10. Field and Pool or Exploratory Area WELCH; BONE SPRINGS		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				11. County or Parish, State			
Sec 28 T26S R26E NWNE 150FNL 1330FWL					EDDY COUNTY, NM		
12. CHECK THE AI	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE OI	F NOTICE,	REPORT, OR OTH	ER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						
☐ Notice of Intent	☐ Acidize	☐ Dee	pen	☐ Product	ion (Start/Resume)	☐ Water Shut-Off	
<del></del>	☐ Alter Casing	🗖 Нус	Iraulic Fracturing	☐ Reclam	ation	☐ Well Integrity	
Subsequent Report	□ Casing Repair	□ Nev	v Construction	☐ Recomp	olete	Other	
☐ Final Abandonment Notice	☐ Change Plans	Plug	g and Abandon	☐ Tempor	arily Abandon		
	☐ Convert to Injection	□ Plug	g Back	☐ Water I	Disposal		
following completion of the involved testing has been completed. Final Al determined that the site is ready for f Update Casing pressure test:  Surf: 13-3/8 test 1500 psi for Inter: 9-5/8 test 1500 psi for 3 Prod: 5-1/2 test 7500 psi for 3	andonment Notices must be fil inal inspection.  30 min. OK NM (	ed only after all	requirements, includi ERVATION STRICT	ng reclamation	n, have been completed an	d the operator has	
		RECEIV					
14. I hereby certify that the foregoing is	true and correct. Electronic Submission # For CHISHOLM EN Committed to AFMSS for	ERGY OPERA	TING, LLC, sent t	o the Carlsb	ad /		
Name (Printed/Typed) BETTIE W	/ATSON		Title AGENT	TACCE	DTED FOR RE	ORDI	
Signature (Electronic S	Submission)		Date 08/30/20	ACCIA		Tha	
	THIS SPACE FO	R FEDERA	AL OR STATE (	OFFICE/U	SE JAN	INMAXI	
Approved By  Conditions of approval, if any, are attache ertify that the applicant holds legal or equivalent would entitle the applicant to conduct the conduction would entitle the applicant to conduct the applicant the applican	iitable title to those rights in the		Title Office	DUNG C	ARLSBAD VELO OFE	ATT THE	
itle 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it a statements or representations as	crime for any po to any matter w	erson knowingly and ithin its jurisdiction.	willfully to ma	ake to any department or a	gency of the United	
				<del></del>			