Form 3160-5 (June 2015)	DEPARTMENT OF THE I	UNITED STATES PARTMENT OF THE INTERIOR		FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018	
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not us any standard for duiling to reporter an abandoned well. Use form 3160-3 (APD) for such proposals.			5. Lease Serial No.		
Do not abandor	6. If Indian, Allottee				
SUBI	7. If Unit or CA/Agr	7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well			8. Well Name and No UBER EAST SW).).	
Oil Well Gas Well Other: INJECTION Ontact: MELANIE WILSON			9. API Well No.	9. API Well No.	
MESQUITE SWD, INC. E-Mail: mjp1692@gmail.com 3a. Address 3b. Phone No. (include area code)			30-015-43806	30-015-43806 10. Field and Pool or Exploratory Area	
PO BOX 1479 CARLSBAD, NM 8822		Ph: 575-914-1461	SWD;DEVONI	SWD;DEVONIAN	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T23S R31E Mer NMP NWSE 2345FSL 660FEL			11. County or Parish, State		
Sec 24 1235 R31E Me	R NMP NWSE 2345FSL 660FEL	-	EDDY COUNT	Y, NM	
12. CHECK 1	HE APPROPRIATE BOX(ES)	TO INDICATE NATURE O	F NOTICE, REPORT, OR OT	HER DATA	
TYPE OF SUBMISSIO	N	TYPE OF ACTION			
Notice of Intent	Acidize	Deepen	Production (Start/Resume)	□ Water Shut-Off	
Subsequent Report	□ Alter Casing	Hydraulic Fracturing	□ Reclamation	U Well Integrity	
	Casing Repair	New Construction	Recomplete	🛛 Other Change to Original A	
Final Abandonment No.	otice Change Plans Convert to Injection	Plug and Abandon Plug Back	Temporarily Abandon Water Disposal	PD	
determined that the site is re Mesquite SWD, Inc. re Rig Layout	spectfully requests the following	changes to the original APD:	G C / C Accepted for rec	o-12-18 Cord • NMOCD	
Approved: V-door east Change to: Well pad s	its angled. Request permission from south. Layout attached.	to have V-door facing north/no	orthwest.	EIVED	
lo new disturbance. Use original APD COAs. Approved. WDD. Original EA # for APD. DOI-BLM-1			OCT 1	OCT 1 2 2018	
Approved. WDD	Original EA #f	or APD. DOI-BL	M-NM-2015-11	38-EA	
14. I hereby certify that the for	Electronic Submission # For MESQ	437079 verified by the BLM Wel UITE SWD, INC., sent to the Ca processing by PRISCILLA PE	risbad		
Name(Printed/Typed) SH	ERYL BAKER				
Signature (Ele	ctronic Submission)	Date 09/26/20	018		
<u></u>	THIS SPACE FO	OR FEDERAL OR STATE	OFFICE USE		
_Approved By	1/ lagter		M-l&M	eg/24/201	
Conditions of approval, if any, ap certify that the applicant holds leg which would entitle the applicant	attached. Approval of this notice does al or equitable title to those rights in the to conduct operations thereon.	not warrant or e subject lease Office	F.O		
Title 18 U.S.C. Section 1001 and States any false, fictitious or fra	Title 43 U.S.C. Section 1212, make it a udulent statements or representations as	crime for any person knowingly and to any matter within its jurisdiction.	willfully to make to any department o	r agency of the United	
(Instructions on page 2) ** OF	PERATOR-SUBMITTED ** O	PERATOR-SUBMITTED *	* OPERATOR-SUBMITTED) **	

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