

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

**Carlsbad Field Office**  
**OCD Artesia**  
FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018  
Use Serial No.  
NMNM70200

**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.*

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator CHISHOLM ENERGY OPERATING LLC Contact: JENNIFER ELROD Email: jelrod@chisholmenergy.com		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 801 CHERRY STREET FORT WORTH, TX 76012	3b. Phone No. (include area code) Ph: 817-953-3728 Ext: 3728	8. Well Name and No. ASTEROID 20-29 FED COM WCA 1H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 20 T23S R26E 120FNL 1360FEL 32.296558 N Lat, 104.311371 W Lon		9. API Well No. 30-015-45876-00-X1
		10. Field and Pool or Exploratory Area PURPLE SAGE-WOLFCAMP (GAS)
		11. County or Parish, State EDDY COUNTY, NM

**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"/> Hydraulic Fracturing	<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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Change to Original APD
	<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 recomplete 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.

\*\*\*NAME CHANGE SUNDRY\*\*\*

CHANGE NAME  
FROM: ASTEROID 20-29 FED COM WCB 1H  
TO: ASTEROID 20-29 FED COM WCA 1H

**NM OIL CONSERVATION**  
ARTESIA DISTRICT  
OCT 17 2019

RECEIVED

*All previous conditions of Approval still apply. DR*

14. I hereby certify that the foregoing is true and correct.  
Electronic Submission #486437 verified by the BLM Well Information System  
For CHISHOLM ENERGY OPERATING LLC, sent to the Carlsbad  
Committed to AFMSS for processing by PRISCILLA PEREZ on 10/04/2019 (20PP0056SE)

Name (Printed/Typed) JENNIFER ELROD	Title SR REGULATORY ANALYST
Signature (Electronic Submission)	Date 10/03/2019

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

Approved By <u>DYLAN ROSSMANGO</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>10/07/2019</u>
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 Carlsbad		

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.

(Instructions on page 2)

**\*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\* BLM REVISED \*\***

*RW 10-21-19*

District I  
1625 N. French Dr., Hobbs, NM 88240  
Phone: (575) 393-6161 Fax: (575) 393-0720  
District II  
811 S. First St., Artesia, NM 88210  
Phone: (575) 748-1283 Fax: (575) 748-9720  
District III  
1000 Rio Brazos Road, Aztec, NM 87410  
Phone: (505) 334-6178 Fax: (505) 334-6170  
District IV  
1220 S. St. Francis Dr., Santa Fe, NM 87505  
Phone: (505) 476-3460 Fax: (505) 476-3462

State of New Mexico **NM OIL CONSERVATION** Form C-102  
ARTESIA DISTRICT  
Energy, Minerals & Natural Resources Department  
OIL CONSERVATION DIVISION  
1220 South St. Francis Dr.  
Santa Fe, NM 87505

Revised August 1, 2011  
Submit one copy to appropriate District Office

UCI 17 2019  
**RECEIVED**  AMENDED REPORT

**WELL LOCATION AND ACREAGE DEDICATION PLAT**

<sup>1</sup> API Number 30-015-45876	<sup>2</sup> Pool Code 98220	<sup>3</sup> Pool Name PURPLE SAGE; WOLFCAMP
<sup>4</sup> Property Code <del>325383</del> 325385	<sup>5</sup> Property Name ASTEROID 20-29 FED COM WCA	
<sup>7</sup> OGRID No. 372137	<sup>8</sup> Operator Name CHISHOLM ENERGY OPERATING, LLC	<sup>6</sup> Well Number 1H  <sup>9</sup> Elevation 3386.9

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	20	23 S	26 E		120	NORTH	1390	EAST	EDDY

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
O	29	23 S	26 E		330	SOUTH	2250	EAST	EDDY

<sup>12</sup> Dedicated Acres 640	<sup>13</sup> Joint or Infill INFILL	<sup>14</sup> Consolidation Code	<sup>15</sup> Order No.
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No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<p style="font-size: small;"> <sup>17</sup> OPERATOR CERTIFICATION          I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.  <i>Jennifer Elrod</i> 9/27/2019          Signature Date          JENNIFER ELROD          Printed Name          JELROD@CHISHOLMENERGY.COM          E-mail Address       </p> <p style="font-size: small;"> <sup>18</sup> SURVEYOR CERTIFICATION          I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.          SEPTEMBER 19, 2019          Date of Survey  <i>William F. Jaramillo</i>          Signature and Seal of Professional Surveyor          Certificate Number: WILLIAM F. JARAMILLO 1521277          SURVEYOR NO. 6280B       </p>	<p style="font-size: x-small;"> <sup>17</sup> OPERATOR CERTIFICATION          I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.  <i>Jennifer Elrod</i> 9/27/2019          Signature Date          JENNIFER ELROD          Printed Name          JELROD@CHISHOLMENERGY.COM          E-mail Address       </p> <p style="font-size: x-small;"> <sup>18</sup> SURVEYOR CERTIFICATION          I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.          SEPTEMBER 19, 2019          Date of Survey  <i>William F. Jaramillo</i>          Signature and Seal of Professional Surveyor          Certificate Number: WILLIAM F. JARAMILLO 1521277          SURVEYOR NO. 6280B       </p>
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RW 10-21-19

Intent  As Drilled

API # 30-015-45876		
Operator Name: CHISHOLM ENERGY OPERATING, LLC	Property Name: ASTEROID 20-29 FED COM WC A	Well Number 1H

Kick Off Point (KOP)

UL	Section	Township	Range	Lot	Feet	From N/S	Feet	From E/W	County
B	20	23S	26E		120	NORTH	1390	EAST	EDDY
Latitude 32.2965580					Longitude 104.3114671				NAD 83

First Take Point (FTP)

UL	Section	Township	Range	Lot	Feet	From N/S	Feet	From E/W	County
B	20	23S	26E		330	NORTH	2250	EAST	EDDY
Latitude 32.2959768					Longitude 104.3142469				NAD 83

Last Take Point (LTP)

UL	Section	Township	Range	Lot	Feet	From N/S	Feet	From E/W	County
O	29	23S	26E		100	SOUTH	2250	EAST	EDDY
Latitude 32.2686763					Longitude 104.3141647				NAD 83

Is this well the defining well for the Horizontal Spacing Unit?  NO

Is this well an infill well?  YES

If infill is yes please provide API if available, Operator Name and well number for Defining well for Horizontal Spacing Unit.

API # 30-015-45877		
Operator Name: CHISHOLM ENERGY OPERATING, LLC	Property Name: ASTEROID 20-29 FED COM WCA	Well Number 2H

KZ 06/29/2018