

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT **OCD Artesia**

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.*

5. Lease Serial No.  
NMNM030752

6. If Indian, Allottee or Tribe Name

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

|  |   |  |
|--|---|--|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other                               |   | 7. If Unit of CA/Agreement, Name and/or No.                        |
| 2. Name of Operator<br>RAY WESTALL OPERATING, INC.   |   | 8. Well Name and No.<br>EMPIRE A FEDERAL COM # 2                   |
| 3a. Address<br>P.O. BOX 4 - LOCO HILLS, NM 88255   | 3b. Phone No. (include area code)<br>575-677-2370 | 9. API Well No.<br>30-015-29618                                    |
| 4. Location of Well (Footage, Sec., T. R. M., or Survey Description)<br>SECTION 27 TOWNSHIP 18 SOUTH, RANGE 29 EAST, N.M.P.M.<br>UL - H 1650' FNL AND 660' FEL |   | 10. Field and Pool or Exploratory Area<br>TRACK:MORROW,NORTH (GAS) |
|  |   | 11. Country or Parish, State<br>EDDY COUNTY, NEW MEXICO            |

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"/> 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 <b>CHANGE OF OPERATOR</b> |
|  | <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 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.)

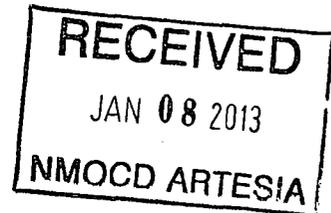
THE UNDERSIGNED ACCEPTS ALL APPLICABLE TERMS, CONDITIONS, STIPULATIONS AND RESTRICTIONS CONCERNING OPERATIONS CONDUCTED ON THE LEASED LAND OR PORTION THERE OF, AS DESCRIBED BELOW:

LEASE NUMBER: NMNM030752  
BOND NUMBER: RLB0014822

WELLBORE ASSIGNMENT ONLY - EMPIRE A FEDERAL COM # 2

TOWNSHIP 18 SOUTH, RANGE 29 EAST, N.M.P.M.  
SECTION 27 - SE14NE14  
UL - H  
1650' FNL AND 660' FEL  
EDDY COUNTY, NEW MEXICO

EFFECTIVE DATE: 9/25/12



Accepted for record  
NMOCD *JOS*  
*11/15/2012*

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct.  
Name (Printed/Typed) **RENE MATHEWS** Title **PRODUCTION ACCOUNTING DEPT**

Signature *René Mathews* Date **11/15/2012**

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

Approved by *[Signature]* Title **L PET** Date **1/4/2013**

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 (B) makes 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 or to provide any matter within its jurisdiction.