

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD 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.*5. Lease Serial No.
NMLC048491A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

8. Well Name and No.

SAUNDERS FED A 7

2. Name of Operator

Contact: CARIE STOKER

ALAMO PERMIAN RESOURCES LLCE-Mail: cstoker@helmsoil.com

9. API Well No.

30-015-01244-00-S1

3a. Address

415 WEST WALL STREET SUITE 500
MIDLAND, TX 79701

3b. Phone No. (include area code)

Ph: 432-664-7659

10. Field and Pool, or Exploratory
EMPIRE

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 13 T17S R27E NWNE Lot B 330FNL 1650FEL

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

- ☐
- Notice of Intent
-
- ☒
- Subsequent Report
-
- ☐
- Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|-----------------------------------------------|-------------------------------------------|----------------------------------------------------|-----------------------------------------|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input checked="" type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input 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 recomple 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 recomple 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.)

7/25/2013

Subsequent reclamation completed per BLM (see attached); site ready for inspection

RECEIVED

NOV 21 2013

NMOC-D-Atesia

Accepted for record
NMOC 11/22/13
LED

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #215300 verified by the BLM Well Information System
For ALAMO PERMIAN RESOURCES LLC, sent to the Carlsbad
Committed to AFMSS for processing by KURT SIMMONS on 08/07/2013 (13KMS6938SE)

Name (Printed/Typed) CARIE STOKER

Title REGULATORY AFFAIRS COORDINATOR

Signature (Electronic Submission)

Date 07/30/2013

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

ACCEPTED

JAMES A AMOS
Title SUPERVISOR EPS

Date 11/18/2013

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 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.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

SITE RESTORATION FORM

Page 1 of 2

OPERATOR: Alamo Permian Resources

LAT/LONG: 32.84046 104.22923

FACILITY NAME: Saunder A #7 (P&A)

LOCATION: Sec 13, T12S, R27E

API-30-15-01244

Eddy County, NM, Unit B

Inspection: 5-8-13 / 7-25-13

INSPECTION CHECKLIST	YES	NO	REMARKS
A.) Surface Owner			
1.) Federal	X		
2.) State			
B.) Type Surface			
1.) Native soil	X		Loose soil with some gypsum at the surface
2.) Caliche		X	
3.) other			
C.) Well Site Misc.			
1.) Steel marker	X		
a. At least, 4" in diameter & 4' above ground	X		
b. Set in concrete	X		
c. Info welded or permanently stamped on marker	X		
2.) Electrical Pole		X	
3.) Anchors		X	
7.) others			
D.) Equipment Onsite			
1.) Sign - H2S, etc		X	
2.) Pipelines		X	
3.) Flowlines		X	
4.) Tanks/Vessels etc.		X	
5.) Abandoned lines, type		X	
6.) Non-retrieved flowlines/pipelines - fluids removed		X	
7.) other			
E.) Onsite Debris			
1.) Trash/Junk etc.		X	
2.) Cement/Concrete or bases		X	
3.) Metals etc.		X	
4.) Other			
F.) Surface Staining			
1.) Asphaltic soil		X	
2.) Salts		X	
3.) Oily soils		X	
4.) Stressed Areas			
5.) Other:			
G.) Reserve Pit Area			
1.) Pit present site		X	
2.) Pit vegetation %			
3.) Barren Areas around pit			
4.) Plastic Liner Evidence in pit			
5.) Surface Salt Staining			
6.) Runoff or Erosional Issues			
7.) Other:			

SITE RESTORATION FORM

Page 2 of 2

OPERATOR: Alamo

FACILITY NAME: Saunders A #7

[illegible]