

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.
NMLC037777A

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 ☐ Other8. Well Name and No.
LEVERS FEDERAL 3Y

2. Name of Operator

MCI OPERATING OF NM LLC

Contact: JEAN MANN

E-Mail: ceo@multi-corpinternational.com

9. API Well No.

30-015-02787

3a. Address

P O BOX 471
DENVER CITY, TX 79323

3b. Phone No. (include area code)

Ph: 806-592-8659
Fx: 806-592-815110. Field and Pool, or Exploratory
GRAYBURG JACKSON

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

Sec 33 T16S R29E 330FSL 1970FWL

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 | 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 |
| | <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | Successor of Operator |
| | <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 recompleat 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 recompleat 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.)

Other wells in Lease NMLC037777A:

Levers Federal 005 API 30-015-22443 S-33, T-16S, R-29E, 660 FSL, 660 FWL

Levers Federal 006 API 30-015-23032 S-33, T-16S, R-29E, 1650 FSL, 990 FWL

As required by 43 CFR 3100.5 (A) and 43 CFR 3162.3 we are notifying you of a change of operator named on the above wells. MCI Operating of NM, LLC as new operator, accepts all applicable terms, conditions, stipulations and restrictions concerning operations conducted on the lease or portion of the lease thereof.

Bond Coverage: Oil & Gas Statewide \$25,000.00

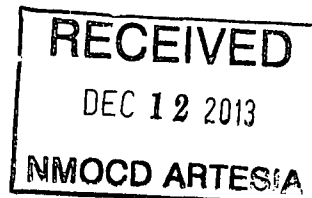
Bond Number: NMB0032

Effective Date: November 20, 2013

NMB001132

SUBJECT TO LIKE
APPROVAL BY STATESEE ATTACHED FOR
CONDITIONS OF APPROVAL

Accepted for record



| | |
|---|-----------------|
| 14. I hereby certify that the foregoing is true and correct. | |
| Electronic Submission #228871 verified by the BLM Well Information System For MCI OPERATING OF NM LLC, sent to the Carlsbad Committed to AFMSS for processing by JERRY BLAKLEY on 12/09/2013 () | |
| Name (Printed/Typed) JEAN MANN | Title PRESIDENT |
| Signature (Electronic Submission) | Date 12/06/2013 |

NMOCD
TOS 12/12/2013

| THIS SPACE FOR FEDERAL OR STATE OFFICE USE | | | |
|---|--------|--------------------------|------|
| Approved By | Title | APPROVED DEC - 9 2013 | Date |
| 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 | | |
| 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 any statement or representation as to any matter within its jurisdiction. | | | |

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****

**BUREAU OF LAND MANAGEMENT
Carlsbad Field Office
620 East Greene Street
Carlsbad, New Mexico 88220
575-234-5972**

Effective 11/20/2013
Bond NMB001132

**12/9/2013 Approved subject to Conditions of Approval. JDB
Change of Operator
Conditions of Approval**

1. Tank battery must be bermed/diked (must be able to contain 1 1/2 times the volume of the largest tank).
2. Submit for approval of water disposal method.
3. Submit updated facility diagrams as per Onshore Order #3
4. This agency shall be notified of any spill or discharge as required by NTL-3A.
5. All outstanding environmental issue must be addressed within 90 days. Contact Jim Amos for inspection and to resolve environmental issues. 575-234-5909
6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
7. Subject to like approval by NMOCD.
8. All Reporting to ONRR (OGOR Reports) must be brought current within 30 days of this approval including any past history.