

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTNMOCD
ArtesiaFORM 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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side.		5. Lease Serial No. NMNM106714
1. Type of Well <input type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other: INJECTION		6. If Indian, Allottee or Tribe Name
2. Name of Operator SM ENERGY COMPANY		7. If Unit or CA/Agreement, Name and/or No.
Contact: LISA HUNT E-Mail: lhunt@sm-energy.com		8. Well Name and No. GERONIMO 7
3a. Address 6301 HOLIDAY HILL ROAD, BLDG 1 MIDLAND, TX 79707	3b. Phone No. (include area code) Ph: 432-848-4833 Fx: 432-688-1701	9. API Well No. 30-015-25598-00-S1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 24 T18S R31E SENE 1750FNL 990FEL		10. Field and Pool, or Exploratory SHUGART
		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 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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input checked="" 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 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 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.)

The Geronimo Federal #7 failed a MIT on 5/22/15 with reported annular pressure. SM Energy has since pulled the injection packer/tbg and found the failure to be a hole in the tubing. After re-dressing the packer and replacing the bad joint of a tubing the packer was ran and re-set at 3,680'. Randy Dade gave permission to perform the pressure test and send in the results. See the attached pressure test and meter calibration certificate.

SM Energy is awaiting approval to resume injection.

NM OIL CONSERVATION
ARTESIA DISTRICT

NOV 30 2015

RECEIVED

APD 12/1/15
Accepted for record
NMOCD

14. I hereby certify that the foregoing is true and correct. Electronic Submission #309870 verified by the BLM Well Information System For SM ENERGY COMPANY, sent to the Carlsbad Committed to AFMSS for processing by JENNIFER SANCHEZ on 11/16/2015 (16JAS1194SE)	
Name (Printed/Typed) LISA HUNT	Title REGULATORY TECHNICIAN
Signature (Electronic Submission)	Date 07/22/2015

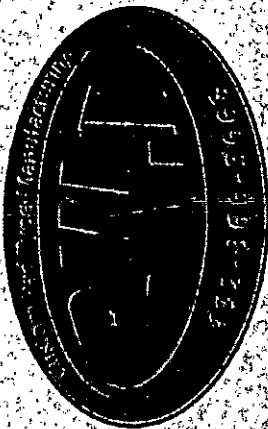
THIS SPACE FOR FEDERAL OR STATE OFFICE USE

APPROVED FOR RECORD /S/ DAVID R. GLASS NOV 17 2015		
Approved By	Title	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 to any department or agency of the United States any false, fictitious or fraudulent representations as to any matter within its jurisdiction.

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

Calibration GC & Sons



Certificate

Part No. _____ Description: Chart Recorder Manufacturer: PWT Model No. 900516
 Sensor: _____ Line Size: _____ No. Lines: _____ Tong Length: _____ Temp. (F): 75

Pressure Range: 0-1000 PSI Accuracy: 99.97 % Full Scale
 PSI Calibrated IN: _____ Vertical: _____ Position: _____

Increasing Pressure			Decreasing Pressure			Increasing Temperature			Decreasing Temperature		
Applied Press	Indicated Press	Diff	App Press	Indicated Press	Diff	App Press	Indicated Press	Diff	App Press	Indicated Press	Diff
0	0	0	1000	1000	0						
200	200	0	800	800	0						
400	400	0	600	600	0						
600	600	0	400	400	0						
800	800	0	200	200	0						
1000	1000	0	0	0	0						

This is to certify that this gauge or load cell has been calibrated and tested against NATIONAL INSTITUTE OF STANDARDS AND TECHNOLOGY, Traceable to INSTRUMENTATION BUREAU STANDARDS. Traceable reference: _____ Test Gauge Calibration: CC88698
 SPECIAL CONDITIONS: Calibrated to standards maintained at Pete's Weight Indicator Repair 210658

DATE OF CALIBRATION: 12/1/2015 TECHNICIAN: [Signature] WITNESSED: [Signature]

