¥.	RECEIVED				
Form 3160-5 (August 2007)	UNITED STATES DEPARTMENT OF THE INTER BUREAU OF LAND MANAGEM DISTRICT		FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010		
	DISTRICT II-ARTESIA			5. Lease Serial No. NMLC029392B	
SUNDRY NOTICES AND REPORTS ON WELLS			- 6. If Indian, Allottee or Tribe Na	6. If Indian, Allottee or Tribe Name	
	e this form for proposals to drill o				
	well. Use Form 3160-3 (APD) for BMIT IN TRIPLICATE - Other instructions of		7. If Unit of CA/Agreement, Nar	ne and/or No.	
1. Type of Well				-	
X Oil Well Gas Well Other				Greenwood Pre-Grayburg 4	
2. Name of Operator	EVRON USA INCORPORATED		9. API Well No. 30-01	30-015-05616	
3a. Address 3b. Phone		e No. (include area code)		10. Field and Pool or Exploratory Area	
6301 Deauville Blvd, Mi		432-687-7216		nugart	
4. Location of Well (Footage, Sec., T., UL - D (NW	R.,M., or Survey Description) (NW) 660' FNL & 660' FWL, Sec. 27	7, T18S, R31E NMF	P Eddy County ,	NEW MEXICO	
12. CHECK 1	THE APPROPRIATE BOX(ES) TO INDI	CATE NATURE OF N	NOTICE, REPORT OR OTHE	R DATA	
TYPE OF SUBMISSION	SION TYPE OF ACTION				
Notice of Intent	Acidize Deep	en ure Treat	Production (Start/Resume) Reclamation	Water Shut-Off Well Integrity	
X Subsequent Report		Construction and Abandon	Recomplete Temporarily Abandon	Other	
Final Abandonment Notice		Back	Water Disposal		
4/8/2018 RIH w/ pkr se 4/9/2018 Unable to rele Cut tbg @ 2676' and le 4/20/2018 Plug #2 - S 1340'. Unable to estab 4/21/2018 Plug #3 - S	Rig #10. 4/4/2018 - 4/7/2018 Work at @ 3143'. Plug #1 - Squeezed 342 ease pkr. Work stuck pkr w/ W/L. V ft fish in hole. potted 72sxs Class C from 2400' - 1 olish rate. Perf @ 1052'. Establish r potted 18sxs Class C cmt from 1380	2sxs Class H cmt fr Vork 1.315" WS do 358' covering fish. ate.	rom 4992' - 3400' w/ 305sxs wn tbg through 4/19/2018. Tagged w/ wireline at 1650	Tag Cmt @ 2680'. '. Perf 4 1/2" csg @	
Surface. RD MOL.		A	CCEPTED FOR RE	CORD	
The subject well was			LUCCIONNE		
RECLAM DUE_/0-			APR 2 6 2018		
14. I hereby certify that the foregoing is true and correct. Name (<i>Printed/Typed</i>) Howie Lucas		Title			
INN	1	. (/			
Signature	,	Date 4/25/	/18		
	THIS SPACE FOR FEDI	ERAL OR STATE C	OFFICE USE		
Approved by					
				Dete	
that the applicant holds legal or equital entitle the applicant to conduct operati		n would Office		Date	
false, fictitious or fraudulent statement	43 U.S.C. Section 1212, make it a crime for any tas or representations as to any matter within its ju		illfully to make to any department or	agency of the United States any	
(Instruction on page 2)	÷				