

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires: January 31, 2004

SUNDRY NOTICES AND REPORTS ON WELLS

NMOCD

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.
NM 010190

16. If Indian, Allottee or Tribe Name

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

8. Well Name and No.
East Shugart Unit #014

9. API Well No.
30-015-05682

10. Field and Pool, or Exploratory Area
Shugart: Yates-7Rs-Queens-Grayburg

11. County or Parish, State
Eddy County, NM

SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
K.P. Kauffman Company, Inc.

3a. Address
1675 Broadway, Suite 2800, Denver, Colorado 80202

3b. Phone No. (include area code)
303-825-4822

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
G-34-18.0S-31E, 2310 FNL, 1650 FEL

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 Change of Operator
	<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 shall 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 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.)

As required by 43 CFR 3100.0-5(a), we are notifying you of a change of operator on the above-referenced well.

Effective May 1, 2018, operations of the above well were transferred from Agua Sucia LLC to K.P. Kauffman Company, Inc. Bond coverage pursuant to 43 CFR 3104 for lease activities is being provided by K.P. Kauffman Company, Inc. under its \$25,000.00 statewide bond coverage, BLM Bond No. NMB000202.

K.P. Kauffman Company, Inc., as new operator, accepts all applicable terms, conditions, stipulations, and restrictions concerning operation conducted on this lease, or portion of lease described.

K.P. Kauffman Company, Inc. agrees to fulfill the duties and assume the obligations of the Unit Operator under and pursuant to all the terms of the applicable Unit Agreement, if any.

Accepted For Record

NMOCD

RECEIVED

10-16-18

OCT 12 2018

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)
Richard P. Stults

DISTRICT II-ARTESIA O.C.D. Title Chief Financial Officer

Signature *[Signature]* Date **5/9/18**

Digitally signed by Rick Stults, o. no. email=rcstults@kpk.com, c. US Date: 2018.05.09 13:27:55 -0600

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____ Date **SEP 7 2018**

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 statements or representations as to any matter within its jurisdiction.

(Instructions on page 2)

**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.
9. If this well is incapable of producing in paying quantities submit NOI to plug and abandon this well or obtain approval to do otherwise within 90 days.
10. Submit plan for approval of well operations for all TA/SI wells within 30 days of this approval to change operator.
11. If not in place acquire operating rights on this lease within 30 days with BLM office in Santa Fe, NM.

JAM 091718