Form 3160-5-(September 2001)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

OCD-ARTESIA

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

5. Lease Serial No.

NM-01165

abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name		
		e de la companya del companya de la companya del companya de la co		7. If Unit o	or CA/A	greement, Name	ind/or No.
1. Type of Well ☐ Oil Well ☐ Gas Well ☐	Other			8. Well No		-	
2. Name of Operator			Year I	Henry 8 I		Com #1	
	744	1	Judanie oode on me	9. API We			
3a. Address		3b. Phone No. (int	udetarea code)	30-015-3			
PO Box 5270 Hobbs, NM 88	240	505-393-5905	Mr. As	10. Field a		or Exploratory A	rea
4. Location of Well (Footage, Sec.,	T, R., M., or Survey Description)			East Burton Flat Morrow 11. County or Parish, State			
1218' FSL & 1820' FEL Unit	O Sec 8-T20S-R29E			Eddy Co			
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NAT	TURE OF NOTICE,				
TYPE OF SUBMISSION			TYPE OF ACTION				
Notice of Intent	Alter Casing	Deepen Fracture Treat	Production (S	tart/Resume)	□ v	Vater Shut-Off Vell Integrity Other Spud and	ooging ich
Subsequent Report	Casing Repair	New Construction	= :	A 1 1	ZI (otner Spud and	Jasnig Jou
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abando Plug Back	n Temporarily Water Dispos		-		
determined that the site is ready 02/12/07MI & spud 26" hole. Mixed @ 12.5 #/g w/ 1.98 yd. Ta with 17 1/2" bit. 02/17/07TD'ed 17 1/2" hole @ 1 Mixed @ 12.5#/g w/ 1.98 yd. T 02/17/07, tested 13 3/8" csg to 15	TD hole at 322'. Ran 322' 20" 9 ail with 200 sks Class C with 29 1238'. Ran 1238' 13 3/8" 54.5# ail w/400 sks Class C with 2%	% CaCl2. Mixed @ 4 J55 BT&C Csg. C CaCl2. Mixed @ 1	14.8 #/g w/ 1.34 yd. Cemented with 650 sks 4.8 #/g w/ 1.34 yd. C	BJ Lite Class ire 60 sks to pit ACCEP	C (35:6 C WOO FED F	5.6) with addition 18 hrs. At 8:30 FOR RECOI	ed out
14. 1 hereby certify that the foregoin	g is true and correct			PETRO	JLEUN	1 ENGINEER	<u> </u>
Name (PrintedlTyped)			**************************************				
Kristi Green		Title	Hobbs Regulatory	Fasters administration on the	بيشيم كالمحا	manda with continued and a second	
Signature Porit	: Green	Date	02/28/07				
	a, VojekiriHISISPAGEFO)RHEDERAMOR	STATE OFFICE U	E-B-PR	# /*/	44	
Approved by (Signature)			Name (Printed/Typed)		Title		
Conditions of approval, if any, are certify that the applicant holds legs which would entitle the applicant to c	attached. Approval of this notice all or equitable title to those rights conduct operations thereon.	does not warrant or in the subject lease	Office			Date	

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.

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UNITED STATES DEPARTMENT OF THE IN BUREAU OF LAND MANA

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

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SUNDRY NOTICES AND REPORTED not use this form for proposals to the or to

Month 8 2007 MM NM-01165

abandoned we	ell. Use Form 3160-3 (AF	PD)	proposals.\	OCD ARTES	b. If Indian, Al	Hottee or Tribe Nam	.e
SUBMIT IN TR	IPLICATE - Other Inst	ructions of	jį/eyersersji	Control of the second	7. If Unit or Ca	A/Agreement, Name	and/or No.
Oil Well Gas Well	1 Other				8. Well Name	and No	
2. Name of Operator	J Other				Henry 8 Federal Com #1		
•	744				9. API Well N		
3a. Address		3b. Phone	No. (include are	a code)	30-015-3492		
PO Box 5270 Hobbs, NM 88240 505-39			905		10. Field and P	Area	
4. Location of Well (Footage, Sec., T, R., M., or Survey Description)					East Burton		
1218' FSL & 1820' FEL Unit O Sec 8-T20S-R29E					11. County or Parish, State Eddy County, NM		
12. CHECK API	PROPRIATE BOX(ES) T	O INDICAT	E NATURE (OF NOTICE, F			
TYPE OF SUBMISSION			TYPE	OF ACTION			
□ Notice of Intent □ Subsequent Report	Acidize Alter Casing Casing Repair	Deepen Fracture New Cor	Treat	Production (Sta Reclamation Recomplete	rt/Resume)	Water Shut-Off Well Integrity Other Casing jo	b and
Subsequent Report	Change Plans	Plug and	Abandon	Temporarily A	bandon	BOEP test	
Final Abandonment Notice	Convert to Injection	Plug Bac	k 🗀	Water Disposal			
determined that the site is ready to 2/22/07TD'ed 12 1/4" hole @ 3 14.6#/g w/ 1.52 yd. Followed w CaCl2. Mixed @ 14.8 #/g w/ 1.3 csg to 1500# for 30 mins, held Of	158'. Ran 3158' 9 5/8" 40# rith 900 sks BJ Lite Class C (3 yd. Circ 70 sks to pit. WC K. Tested formation at casin	(35:65:6) with DC 18 hrs. Tes	additives. Mix t BOPE to 500	ed @ 12.5#/g v 0# & annular to parts and schema	v/1.98 yd. Tail w 2500#. At 11:00 tic attached. Dril ACCEPTED MAR	v/400 sks Class C v pm 02/22/07, teste	with 1% ed 9 5/8"
 14. 1 hereby certify that the foregoing Name (PrintedlTyped) 	g is true and correct		1	} <u> </u>	LE III CO	The Artist Charles Bridge	Se coloniano esg.
Kristi Green			Title Hobbs	Regulatory	The Company of the Assessment of Santa Company	المنظمة العالم والمنطقة المنطقة	د. رحمی این باینهای در مشتهای
Signature Will	Green		Date 02/28/0	17	,		
			\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\			e su degle collega de la c	
Approved by (Signature)		kanta mili da kanta k	Name (Printed/)	Typed	Tit	le	And Section 5
Conditions of approval, if any, are attached. Approval of this notice does not warrant certify that the applicant holds legal or equitable title to those rights in the subject lewhich would entitle the applicant to conduct operations thereon.			rrant or Office	-Jr~m/		Date	
Title 18 U.S.C. Section 1001 and Tit States any false, fictitious or fraudule	le 43 U.S.C. Section 1212, mak nt statements or representations	e it a crime for a	any person know within its jurisdi	ringly and willfully ction.	to make to any dep	partment or agency o	f the United

• WELDING SERVICES, INC. P.O. Box 1541 • Lovington, N.M. 88260 BUS: 505 396-4540 • FAX: 505 396-0044

INVOICE B 6555

Company	1110C		•	DateZe	621,2007	_Start Time	am pm
Lease Z	Yenky 8 Feat	com #				_ County &	_State_ <u>/////</u>
Company							
Wellhead				_ Tester_/_	Inke MERR		
Drlg. Con	tractor 1944ecsays					Rig #	<u> </u>
Tool Push							
Plug Type	C-22		PI	ug Size/	<u>′</u>	rill Pipe Size 4/12	10
Casing Va	alve Opened	5			Check Valve Open	405	
Г		26 2 4 4 5 6 3 1 25 	Rotating) Head	24 22 22 23	18, 20	17
TEST #	9 10 7 8 ITEMS TESTED	TEST LENGTH	LOW PSI	HIGH PSI		REMARKS	
/	12,9,25,6,26	5/10	250	5000	Flame on	B section	lenk-1
2	12 10 15 2	5/10	250	5000	PICLEW	tightend,	+
3	12 11 354	5/18	250	5000	I same /=	/ / / · · · · ·	ect'en
1/	1298	5/10	250	50001	The crew		
-	13 12 7	Sic	250	5000	17	-	/ - / - /
7	15,10,1	3/10		 	Time on	#8 HCR ve.	NC (lak
6	10,10,1	5/10	250	2500	Co Crow	timbered +	/ /
1	19 portuelue	410	250	50001	+ lane	m 4 monut	e velve
3	18,TIW	5/10	250	50001	Leoked, T	g crastiple	ted 2
7	16, Lower Kely	5/10		5000			
10	Dupper Kely	5/10	250	5000			
					90	<u> 30d</u>	
) 5	Leaks"	
						-	
					#8 HER	120 /-	
					,	Cheke	
\$	HR@ \$1000 \$50	00.			125 super	SUB TOTAL	1760
Mileage_/	160 01, - \$ 160.		Koli	W	1	TAX #/ TOTAL #_/	854.2

MAN WELDING SERVICES, W.

Company 11,0.C.	Date Feb 22, 2000
Lease Henry & Fed Com #1	County Eddy
Drilling Contractor / at factor # 48	Plug & Drill Pipe Size 10"C-22 4/2xo

Accumulator Function Test - OO&GO#2

To Check - USABLE FLUID IN THE NITROGEN BOTTLES (III.A.2.c.i. or ii or iii)

- Make sure all rams and annular are open and if applicable HCR is closed.
- Ensure accumulator is pumped up to working pressure! (Shut off all pumps)
 - 1. Open HCR Valve. (If applicable)
 - 2. Close annular.
 - 3. Close all pipe rams.
 - 4. Open one set of the pipe rams to simulate closing the blind ram.
 - 5. For 3 ram stacks, open the annular to achieve the 50+ % safety factor. (5M and greater systems).
 - 6. Record remaining pressure 2000 psi. Test Fails if pressure is lower than required.
 - **a.** {950 psi for a 1500 psi system} **b.** {1200 psi for a 2000 & 3000 psi system}
 - 7. If annular is closed, open it at this time and close HCR.

To Check - PRECHARGE ON BOTTLES OR SPHERICAL (III.A.2.d.)

- Start with manifold pressure at, or above, maximum acceptable pre-charge pressure:
 a. {800 psi for a 1500 psi system}
 b. {1100 psi for 2000 and 3000 psi system}
 - 1. Open bleed line to the tank, slowly. (gauge needle will drop at the lowest bottle pressure)
 - 2. Close bleed line. Barely bump electric pump and see what pressure the needle jumps up to.
 - 3./ Record pressure drop <u>950</u> psi. Test fails if pressure drops below minimum.
- Minimum: a. {700 psi for a 1500 psi system } b. {900 psi for a 2000 & 3000 psi system}

To Check - THE CAPACITY OF THE ACCUMULATOR PUMPS (III.A.2.f.)

- Isolate the accumulator bottles or spherical from the pumps & manifold.
- Open the bleed off valve to the tank, {manifold psi should go to 0 psi} close bleed valve.
 - 1. Open the HCR valve, {if applicable}
 - 2. Close annular
 - 3. With **pumps** only, time how long it takes to regain the required manifold pressure.
 - 4. Record elapsed time / Min 14/Sec. Test fails if it takes over 2 minutes.
- **a.** {950 psi for a 1500 psi system} **b.** {1200 psi for a 2000 & 3000 psi system}

