

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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.

1. Type of Well
☐ Oil Well ☒ Gas Well ☐ Other

JUN 23 2008

2. Name of Operator
LCX Energy, LLC.

OCD-ARTESIA

3a. Address 3b. Phone No. (include area code)

110 North Marienfeld, Suite 200 Midland TX 79701 (432)262-4014

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

SL: 440 FNL & 1880 FEL UL: B, Sec: 11, T: 17S, R: 24E

BH: 660 FSL & 1880 FEL UL: B, Sec: 11, T: 17S, R: 24E

5. Lease Serial No.

NM-108954

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

1724 FEDERAL 112

9. API Well No.

30-015-36072

10. Field and Pool, or Exploratory Area

Collins Ranch; Wolfcamp Northeast

11. County or Parish, State

EDDY

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 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: Perf well |
| | <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.)

4/22/08 - 4/25/08 - Cont RIH w/Tbg & Bit to tag Float Collar @ 8809'. R/U Stripper Head & Power Swivel. Drill out Float Collar @ 8809' and drill cement down to 8833'. Circulate hole clean. Test Casing to 1500 psi OK. R/D swivel & Stripper head. POOH w/tubing and bit. M/U 4 3/4" Bit on 5 1/2" casing scrapper. RIH w/bit scrapper & tubing. R/U Cudd equipment. Safety Meeting, Test Lines to 6000 psi OK. Test casing to 5000 psi, OK. Pump 1000 gals pickle Acid, flush w/120 bbls water, shut down & retest casing to 5000 psi OK, Pump 5000 gals 15% spot acid w/2x Inhibitors, spot w/18 bbls water. R/D Acid equipment. POOH w/tubing, scrapper and bit. P/U TCP Gun Assembly : Gun # 1 = 8830', 14 shots, 2-10' subs & 1-4' sub, 2 jts tbg. Gun # 2 = 8730', 13 shots, 2-10' subs & 1-6' sub, 2 jts. Tbg. Gun # 3 = 8630', 12 shots, 2-10' subs & 1-6' sub, 2 jts tbg. Gun # 4 = 8530', 11 shots. RIH w/TCP Gun Assembly and tubing to space out tubing and bottom Gun @ 8830'. R/U Cudd Equipment. Pressure up on guns and fired guns, Pumped Acid away @ 20.8 bpm w/4410 psi casing and 1368 psi on tubing, ISDP=1290 psi. R/D Cudd Equipment. POOH w/tubing. L/D Guns "ALL GUNS HAD FIRED."

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

Jenifer Sorley

Title Regulatory Analyst

Signature

Date 06/20/2008

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Date

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)

Accepted for record - NMOCD