Form 3160-5 (August 2007)

# UNITED STATES DEPARTMENT OF THE INTERIOR RUBEAU OF LAND MANAGEMENT

JUL 2 7 201

FORM APPROVED OMB No. 1004-0137

(August 2007)	BUREAU OF LAND M.			-	60000		31, 2010
				inata- I	5. Lease Serial No.		
NIIS	NDRY NOTICES AND RE	POPTS C		ington I	ield Office NI 6/If Indian, Allottee or Tribe		078138
	e this form for proposal				our maign, Another or time	Ivaille	
	well. Use Form 3160-3						
SI	JBMIT IN TRIPLICATE - Other	instructions	on page 2.		7. If Unit or CA/Agreement, 1	Name a	nd/or No.
1. Type of Well							
Oil Well	X Gas Well Othe	er			8. Well Name and No.	odor	al B 3
2. Name of Operator					9. API Well No.	euer	di D 3
	Hilcorp Energy Com	pany				045-3	32859
3a. Address	NINE 07440	3b. Phon	e No. (include area co		10. Field and Pool or Explora	-	
382 Road 3100 Aztec, I			505-599-3400			a / Bi	anco Mesaverde
	IWNE) 960' FNL & 2320'	FEL, Sec	. 28, T30N, R1	1W	11. Country or Parish, State San Juan	,	New Mexico
12 CHECK	THE APPROPRIATE BOX(E	S) TO IND	ICATE NATURE	OF NO	TICE REPORT OR OTH	IED L	ΔΤΔ
	THE AFFRONIATE BOX(E	.0) 10 1110				ILIV	,ATA
TYPE OF SUBMISSION			TYPE	OF AC			
X Notice of Intent	Acidize	Deep			roduction (Start/Resume)		Water Shut-Off
0	Alter Casing		ure Treat		eclamation	_	Well Integrity
Subsequent Report	Casing Repair		Construction		ecomplete		Other
	Change Plans		and Abandon		emporarily Abandon		
Final Abandonment Notice  13. Describe Proposed or Completed Op	Convert to Injection		Back		Vater Disposal		
determined that the site is ready for Hilcorp Energy Comparthe existing Dakota. At	Abandonment Notices must be file final inspection.)  ny plans to recomplete tached is the MV plat and be utilized for the recomplete.	he subject	ct well in the M ure. A DHC ap	lesaver	de formation and do	wnh	ole commingle with
SEE ATTACHED FOR CONDITIONS OF APPROVAL	Ne I	otify NMO prior to be operat	CD 24 hrs ginning ions	A	ELM'S APPROVAL OR ACCTION DOES NOT REL DPERATOR FROM OBTA AUTHORIZATION REQU DN FEDERAL AND INDI	IEVE ININ IRED	G ANY OTHER FOR OPERATIONS
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Ty	yped)			3-0	WH	
Cherylene Weston			Title Opera	tions/Re	egulatory Technician	Sr.	T III
Signature Changleux	Mester		Date 7-3	210-1	8		
0	THIS SPACE F	OR FEDE	RAL OR STAT	E OFF	ICE USE		
Approved by	Tambekou ned. Approval of this notice does no	ot warrant or c		tle Petr	oleum Enginee		Date 7/30/2018

Office FFO

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.

(Instruction on page 2)

that the applicant holds legal or equitable title to those rights in the subject lease which would

entitle the applicant to conduct operations thereon.

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#### Federal B #3

#### Section 28-T30N-R11W

API#: 30-045-32859

# **MV Recompletion Procedure**

7/24/2018

#### Procedure:

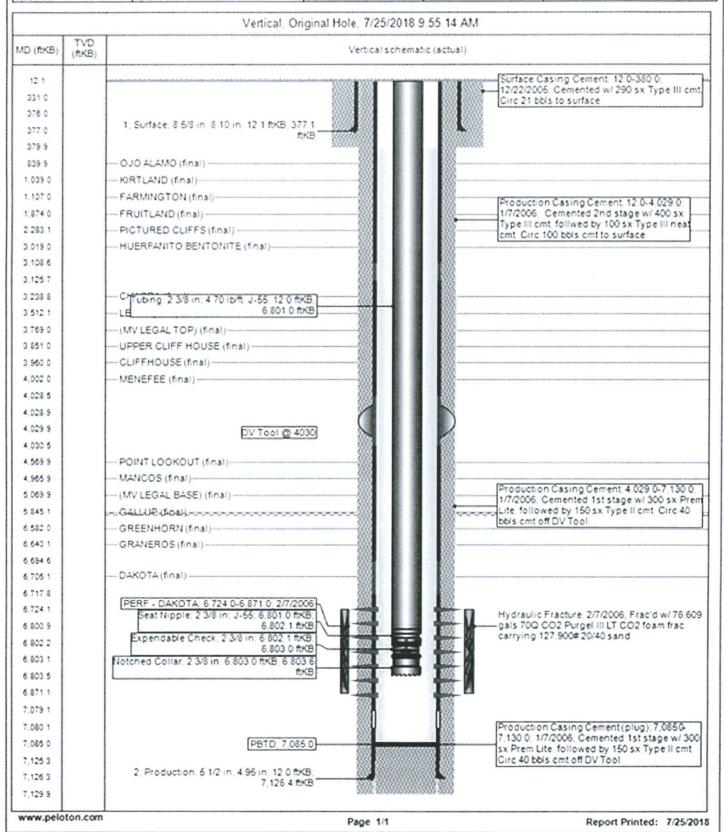
- 1. MIRU Service rig and associated equipment, test BOP.
- 2. TOOH w/ 2 3/8" tubing set at 6804'.
- 3. Run gauge ring or string mill.
- 4. Set 5.5" bridge plug at approximately 5070'.
  - a. Note: Cement was circulated above DV tool and to surface.
- 5. Decide if frac string is required. If so, run frac string and packer. Pressure test either casing or frac string, whichever is utilized.
- 6. ND BOP, NU frac stack and test frac stack to frac pressure.
- 7. Perforate and frac the Mesaverde. Estimated interval: 3800'-5070'.
- 8. Cleanout to plug at base of MV. Flow test MV. Cleanout to PBTD.
- 9. TIH and land production tubing. Get a commingled Dakota/Mesaverde flow rate.
- 10. Release service rig and turn well over to production.



#### **Current Schematic**

Well Name: FEDERAL B 03

		Field Name Basin Dakota	Ucense No	State Province New Mexico	Vertical
Ground Elevation (1) 5.937.00	Original KB-RT Elevation (t) 5,949.00	ktb-Ground Distan	ce (t) k3-Casing Flange	e Distance (%) <3-Tubing Hang	er Distance (t)



District I

1625 N. French Dr., Hobbs, NM 88240 Phone:(575) 393-6161 Fax:(575) 393-0720

District II

811 S. First St., Artesia, NM 88210 Phone:(575) 748-1283 Fax:(575) 748-9720 District III

1000 Rio Brazos Rd., Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170

District IV

1220 S. St Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3470 Fax: (505) 476-3462

State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505

Form C-102 August 1, 2011

Permit 255194

### WELL LOCATION AND ACREAGE DEDICATION PLAT

1. API Number 30-045-32859	2. Pool Code 72319	3. Pool Name BLANCO-MESAVERDE (PRORATED GAS)
4. Property Code	5. Property Name	6. Well No.
321981	FEDERAL B	003
7. OGRID No.	8. Operator Name	9. Elevation
372171	HILCORP ENERGY COMPANY	5937

10. Surface Location

UL - Lot		ction	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
	В	28	301	110	V 2	960	N	2320	E	SAN JUAN

11. Bottom Hole Location If Different From Surface

UL - Lot 2	Section	Township	Range	Lot Idn	Feet From	N/S Line	Feet From	E/W Line	County
12. Dedicated	Acres 20.08 E/2		13. Joint or Infill		14. Consolidation	on Code		15. Order No.	

#### NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

#### **OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

E-Signed By: (herulene Wloton

Cherylene Weston, Operations/Regulatory Tech-Sr. July 26, 2018

#### SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Surveyed By:

JOHN A. VUKONICH

Date of Survey: Certificate Number: 4/30/2005



# **United States Department of the Interior**

#### BUREAU OF LAND MANAGEMENT

Farmington District Office 6251 College Blvd. - Suite A Farmington, New Mexico 87402 www.blm.gov/nm



# CASING REPAIR, WORKOVER, AND RECOMPLETION CONDITION OF APPROVAL

- 1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs.
- 2. If a CBL or other logs are run, provide this office with a copy.
- 3. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minutes test period. Provide test chart with your subsequent report of operations
- 4. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.
- 5. Contact this office at (505) 564-7750 prior to conducting any cementing operations

# **SPECIAL STIPULATIONS:**

- 1. Pits will be fenced during work-over operation.
- 2. All disturbance will be kept on existing pad.
- 3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.
- 4. Pits will be lined with an impervious material at least 12 mils thick.