Form 3160-5 (June 2015)

## 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 re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. FORM APPROVED OMB No. 1004-0137

Expires: January 31, 2018

	Expired. daridary or, 2010			
5. Lease Numbe	r:			
NMSF077383				
6. If Indian, allott	ee or Tribe Name:			

SUBMIT IN TRIPLIC	CATE - Other instructions on p	7. Unit Agreement Name:			
Type of Well:					
Oil Well X Gas Well Other			8. Well Name and Number:		
			FEDERAL GAS COM 1		
2. Name of Operator:			9. API Well No.		
Hilcorp Energy Company			3004507196		
3a. Address 3b. Phone No. (include area code)			10. Field and Pool:		
382 Road 3100 Aztec, NM 87410 505-599-3400			DK - BASIN::DAKOTA		
4 Location of Well (Footage Sec	T. R. M. or Survey Description	1			
4. Location of Well (Footage, Sec.,T.,R.,M., or Survey Description)  1190' FNL & 1190' FEL Sec:28, T:028N, R:010W, Mer NMP NENE			11. County and State:		
TO ALCOHOLO SOLICIA SO			SAN JUAN, NM		
	IECK APPROPRIATE BOX(ES)	VII. D. T.	E OF NOTICE, REPORT, OTHER DAT	A	
TYPE OF SUBMISSION		TY	PE OF ACTION		
Notice of Intent	Acidize	Deepen	Production (Start/Resume)	Water Shut-Off	
	Alter Casing	Hydraulic Fracturing	Reclamation	Well Integrity	
X Subsequent Report	Casing Repair	New Construction	Recomplete	X Other	
	Change Plans	Plug and Abandon	Temporarily Abandon	Production	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	Verification	
	ent Notices must be filed only after al		tion in a new interval, a Form 3160-4 must be clamation, have been completed and the ope		
A production verification was	performed on the subject well o	n 9/27/2018. Please ex	tend the shut-in status.		
TP: 0 CP:	18 Initial MCF: 0	sodiement.	MMED		
Meter No.: FR2224HC	Gas Co.: HEC				
Production Verification - com	pression needed for well to prod	luce over line pressure	DEC 2 1 2018		
Production Verification - compression needed for well to produce over line pressure.					
Proj Type.: Production Veri	ification		DISTRICT III		
14. I Hereby certify that the	foregoing is true and correct.				
// /-	. 1 . 0 .				
Signed Christine Broo	istine Brock Tit	tle: Operations/Regula	tory Tech - Sr. Date: 9/27/201	8	
	THIS SPACE F	FOR FEDERAL OR STA	TE OFFICE USE		
APPROVED BY	we Markiewic	Title	AFM	Date 12/18	
Conditions of approval, if any, are attache ertify that the applicant holds legal or eq which would entitle the applicant to condu	uitable title to those rights in the subje		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 with its jurisdiction.