U.S. Department of the interior BUREAU OF LAND MANAGEMENT Sundry Print Report

Well Name: FEDERAL DM

Well Location: T18S / R32E / SEC 8 /

NENE /

County or Parish/State: LEA /

M

Well Number: 1

Type of Well: OIL WELL

Allottee or Tribe Name:

Lease Number: NMLC064009C

Unit or CA Name:

Unit or CA Number:

US Well Number: 300252935400X3

Well Status: Abandoned

Operator: REGENERATION ENERGY CORPORATION

Sundry ID: 2648810

Type of Submission: Subsequent Report

Date Sundry Submitted: 12/14/2021

Date Operation Actually Began: 12/14/2021

Type of Action: Plug and Abandonment

Time Sundry Submitted: 03:07

Actual Procedure: see attached

Actual Procedure

Fed_DM_20211214150712.pdf

Reclamation Due 5-22-22

Accepted for record – NMOCD

JRH

05/08/2023

Well Name: FEDERAL DM

Well Location: T18\$ / R32E / SEC 8 /

NENE /

County or Parish/State: LEA /

NM

Well Number: 1

Type of Well: OIL WELL

Allottee or Tribe Name:

Lease Number: NMLC064009C

Unit or CA Name:

Unit or CA Number:

US Well Number: 300252935400X3

Well Status: Abandoned

Operator: REGENERATION ENERGY CORPORATION

I certify that the foregoing is true and correct. 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. Electronic submission of Sundry Notices through this system satisfies regulations requiring a submission of Form 3160-5 or a Sundry Notice.

Operator Electronic Signature: WILLIAM MILLER

Signed on: DEC 14, 2021 03:07 PM

Name: REGENERATION ENERGY CORPORATION

Title: Landman

Street Address: 808 W. Main St.

City: Artesia

State: NM

Phone: (575) 736-3535

Email address: wmiller@pvtn.net

Representative Name:

Street Address:

City:

State:

Zip:

Phone:

Email address:

BLM POC Name: JAMES A AMOS

BLM POC Phone: 5752345927

Disposition: Accepted

Signature: James A. Amos

BLM POC Title: Acting Assistant Field Manager

BLM POC Email Address: jamos@blm.gov

Disposition Date: 01/03/2022

Plugging Report Federal DM #1 API 30-025-29354

- 11/15/2021 Move in equipment and rig up. Installed BOP and set 2 7/8" workstring on racks. Made gauge ring run and set 5 ½" CIBP on wireline at 6288'. Started in the hole with the workstring.
- 11/16/2021 Finish picking up workstring and tagged CIBP at 6288'. Circulated MLF and tested casing to 500#. Casing good. Spot 25 sx Class C cement on top of the CIBP. POOH and SION
- 11/17/2021 Tagged cement at 6053'. Spot 25 sx cement at 6049' with CaCl. WOC and tagged at 5828'. POOH to 4554' and SION.
- 11/18/2021 Spot 25 sx cement at 4554' with CaCl. WOC and tagged at 4317'. POOH to 2866' and spot 60 sx cement. POOH and SION.
- 11/19/2021 Tagged cement at 2296'. POOH to 1150' and spot 25 sx cement with CaCl. WOC and tagged cement at 906'. POOH to 484' and circulated cement to surface with 47 sx cement. Rigged down.
- 11/22/2021 Dug out cellar and cut off wellhead. Filled up 5 ½" and 8 5/8" casing strings to surface with 7 sx cement. Installed marker, cleaned the pit, removed the anchors, and moved equipment out.

Form 3160-5 UNITED STATES (June 2019) DEPARTMENT OF THE INTERIOR				Ĭ	FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2021			
	BUREAU OF LAND MANAGEMENT					5. Lease Serial No. NMLC 064009C		
Do not use this	NOTICES AND REPOI form for proposals to Use Form 3160-3 (AP	drill or to	re-enter an		6. If Indian. Allottee or T	ribe Name		
	N TRIPLICATE - Other instruc				7. If I, nit of CA Agreem	ent. Name and or No.		
1 Type of Well					8. Well Name and No Fe	oderal DM #1		
	Well Other				9. API Well No. 30-025-			
2. Name of Operator Regeneration		I DI N	e. 1.1		10. Field and Pool or Ex			
3a Address PO BOX 210 Artesia NM 88211-02	I F	6. Phone No (575) 736-353	include area cod 5	e)	Young; Wolfcamp; north			
4. Location of Well (Footage, Sec., 7	.R.M., or Survey Description)				11. Country or Parish, State			
760 FNL 960 FEL Unit Ltr. A					Lea, New Mexico			
12. C)	HECK THE APPROPRIATE BO	X(ES) TO INE	ICATE NATURI	E OF NOTI	CE, REPORT OR OTHE	R DATA		
TYPE OF SUBMISSION			TY	PE OF ACT	TION			
Notice of Intent	Acidize	Deep			uction (Start/Resume)	Water Shut-Off		
140(lee of likelit	Alter Casing		ulic Fracturing		amation	Well Integrity Other		
Subsequent Report	Casing Repair Change Plans	=	Construction and Abandon		omplete porarily Abandon	Ottlet		
Final Abandonment Notice	Convert to Injection	Plug		= '	r Disposal			
see attached. All the surface equipment wil reclamination is finshised. Ti	I be removed and the reclamin hank you					emination and after the		
14. I hereby certify that the foregoing William M		ted/Typed)	landman Title					
Signature A	7		Date		12/09/202	21		
Arrested for A	Record THE SPACE	FOR FED	ERAL OR ST	TATE OF	ICE USE			
Approved Lames	P. amos		Title 5	AET	D	atc /- 3-22		
Conditions of approval, if any, are attempted that the applicant holds legal of which would entitle the applicant to of	or equitable title to those rights if	oes not warran the subject le	t or ase Office	FO				

title 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)
Released to Imaging: 5/8/2023 9:58:23 AM

Form 3160-5 (June 2019)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137 Expires: December 31, 2024

BURI	EAU OF LAND MANAGE	5. Lease Serial No. NM	5. Lease Serial No. NMLC 064009C		
Do not use this f	OTICES AND REPORTS orm for proposals to dr Jse Form 3160-3 (APD)	ill or to re-en	ter an oosals.	6. If Indian, Allottee or	Tribe Name
	FRIPLICATE - Other instruction			7 If Lant of CA Agreen	nent. Name and or No.
1. Type of Well	/ell Other			8. Well Name and No. F	ederal DM #1
Oil Well Gas W 2. Name of Operator Regeneration Er		9, API Well No 30-025			
		hone No (include	area coder	10. Field and Pool or Ex	
3a. Address PO BOX 210 Artesia, NM 88211-021		736-3535		Young; Wolfcamp; n	
4. Location of Well (Footage, Sec., T.,R 760 FNL 990 FEL Unit Ltr. A	M , or Survey Description)			Lea, New Mexico	tate
12 CHE	CK THE APPROPRIATE BOX(E	S) TO INDICATE	NATURE OF	NOTICE, REPORT OR OTHE	ER DATA
TYPE OF SUBMISSION			TYPEC	OF ACTION	
Notice of Intent	Acidize Alter Casing	Deepen Hydraulic Fra	cturing 🔽	Production (Start/Resume) Reclamation	Water Shut-Off Well Integrity
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abar	_	Recomplete Temporarily Abandon	Other
Final Abandonment Notice 13. Describe Proposed or Completed C	Convert to Injection	Plug Back		Water Disposal	210
Regenerration Energy Corp. he road to the location. Reclamini following day. Thank you	ation was complete on May 4, 2	uzz using a third	pany contra	acioi and iocation was inspe	occurs of company personal are
14. I hereby certify that the foregoing is William Miller	true and correct. Name (Printed/	Typed) L Title	andman		
Signature 7	04	Date		05/27/20	22
	THE SPACE FO	R FEDERAL	OR STAT	E OFICE USE	
Approved by			- - - -		Date
Conditions of approval, if any, are attac certify that the applicant holds legal or which would entitle the applicant to co	equitable title to those rights in the nduct operations thereon.	not warrant or subject lease (Office	- A	
Title 18 U-S.C Section 1001 and Title any false, fictitious or fraudulent staten	3 U.S.C Section 1212, make it a cheents or representations as to any m	rime for any perso natter within its jui	n knowingly a isdiction	and willfully to make to any de	partment or agency of the United States

(Instructions on page 2)

U.S. Department of the interior BUREAU OF LAND MANAGEMENT of made!

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Well Location: T18S / R32E / SEC 8 /

NENE /

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Well Number: 1

Type of Well: OIL WELL

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Fed_DM_20211214150712.pdf

Reclamation Due 5-22-22

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NENE /

County or Parish/State: LEA /

NM

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Operator Electronic Signature: WILLIAM MILLER

Signed on: DEC 14, 2021 03:07 PM

Name: REGENERATION ENERGY CORPORATION

Title: Landman

Street Address: 808 W. Main St.

City: Artesia

State: NM

Phone: (575) 736-3535

Email address: wmiller@pvtn.net

Representative Name:

Street Address:

City:

State:

Zip:

Phone:

Email address:

BLM POC Name: JAMES A AMOS

BLM POC Phone: 5752345927

Disposition: Accepted

Signature: James A. Amos

BLM POC Title: Acting Assistant Field Manager

BLM POC Email Address: jamos@blm.gov

Disposition Date: 01/03/2022

Plugging Report Federal DM #1 API 30-025-29354

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FORM APPROVED **UNITED STATES** OMB No. 1004-0137 Form 3160-5 Expires: October 31, 2021 (June 2019) DEPARTMENT OF THE INTERIOR 5. Lease Serial No. NMLC 064009C BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS 6. If Indian, Allottee or Tribe Name Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. If I nit of CA Agreement. Name and or No. SUBMIT IN TRIPLICATE - Other instructions on page 2 1 Type of Well 8. Well Name and No Federal DM #1 Oil Well Gas Well 9 API Well No. 30-025-29354 2. Name of Operator Regeneration Energy Corp 10. Field and Pool or Exploratory Area 3b. Phone No (include area code) 3a Address PO BOX 210 Young; Wolfcamp; north Artesia NM 88211-0210 (575) 736-3535 11. Country or Parish, State 4. Location of Well (Footage, Sec., T., R.M., or Survey Description) Lea, New Mexico 760 FNL 960 FEL Unit Ltr. A 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA TYPE OF ACTION TYPE OF SUBMISSION Water Shut-Off Production (Start/Resume) Deepen Acidize Notice of Intent Well Integrity Reclaination Hydraulic Fracturing Alter Casing Other New Construction Recomplete Casing Repair Subsequent Report Temporarily Abandon Plug and Abandon Change Plans Water Disposal Plug Back Convert to Injection Final Abandonment Notice 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 must be filed within 30 days following completion of the involved operations of the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has detennined that the site is ready for final inspection.) see attached. All the surface equipment will be removed and the reclamination will be done shortly. We will notify the BLM before reclamination and after the reclamination is finshised. Thank you Reclamation Due. 5.22.22 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) landman William Miller Title 12/09/2021 Date Signature THE SPACE FOR FEDERAL OR STATE OFICE USE

Title 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.

Conditions of approval, if any, are attached. Approval of this notice does not warrant or ceptify that the applicant holds legal or equitable title to those rights in the subject lease

which would entitle the applicant to conduct operations thereon.

Form 3160-5 (June 2019)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0137 Expires: December 31, 2024

ease Serial No.

BURE	EAU OF LAND MANA	5. Lease Serial No.	5. Lease Serial No. NMLC 064009C					
Do not use this f	OTICES AND REPO orm for proposals to Ise Form 3160-3 (AF	drill or to re-	enter an	6. If Indian, Allotted	e or Tribe Name			
	RIPLICATE - Other instru				recinent. Name and or No.			
1. Type of Well Oil Well Gas W	rell Other			8./Well Name and N	lo_Federal DM #1			
3 Name of Operator Regeneration Er				9, API Well No. 30-				
3a. Address PO BOX 210		3b Phone No (inchu	le area code	10. Field and Pool of	10. Field and Pool or Exploratory Area			
Artesia, NM 88211-021		(575) 736-3535		Young; Wolfcam				
4. Location of Well (Footage, Sec., T., R 760 FNL 990 FEL Unit Ltr. A	M , or Survey Description)			11 Country or Parish, State Lea, New Mexico				
12 CHE	UK THE APPROPRIATE BO	X(ES) TO INDICAT	E NATURE	OF NOTICE, REPORT OR U	THER DATA			
TYPE OF SUBMISSION			TYF	E OF ACTION				
Notice of Intent	Acidize Alter Casing	Deepen Hydraulic I	Tracturing	Production (Start/Resum Reclamation	e) Water Shut-Off Well Integrity			
Subsequent Report	Casing Repair Change Plans	New Const		Recomplete [emporarily Abandon]	Other			
Final Abandonment Notice	Convert to Injection	Plug Back		Water Disposal	work and approximate duration thereof. If			
Regenerration Energy Corp. ha road to the location. Reclamina following day. Thank you	s removed all surface facilistion was complete on May	ttles. The location of 4, 2022 using a th	ird party co	ntractor and location was in	been done along with the accress spected by company personal the			
14. I hereby certify that the foregoing is William Miller	true and correct. Name (Pri	nted/Typed) Title	Landman					
Signature 7	07	Date	2	05/2	7/2022			
	THE SPACE	FOR FEDERA	L OR ST	ATE OFICE USE				
Approved by			Titla		Date			
Conditions of approval, if any, are attac certify that the applicant holds legal or which would entitle the applicant to con-	equitable title to those rights aduct operations thereon.	in the subject lease	Title Office					
Title 18 U.S.C Section 1001 and Title 4 any false, fictitious or fraudulent statem	3 U.S.C Section 1212, make tents or representations as to	it a crime for any per any matter within its	rson knowing jurisdiction	gly and willfully to make to an	y department or agency of the United States			

(Instructions on page 2)

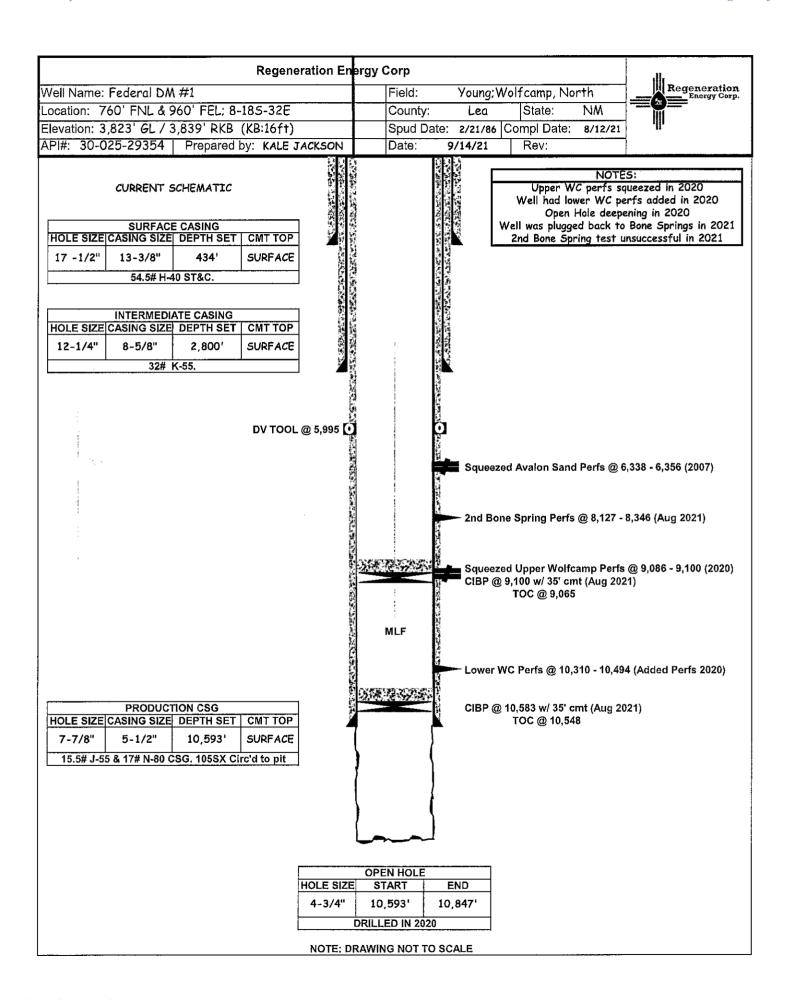
Form 3160-5

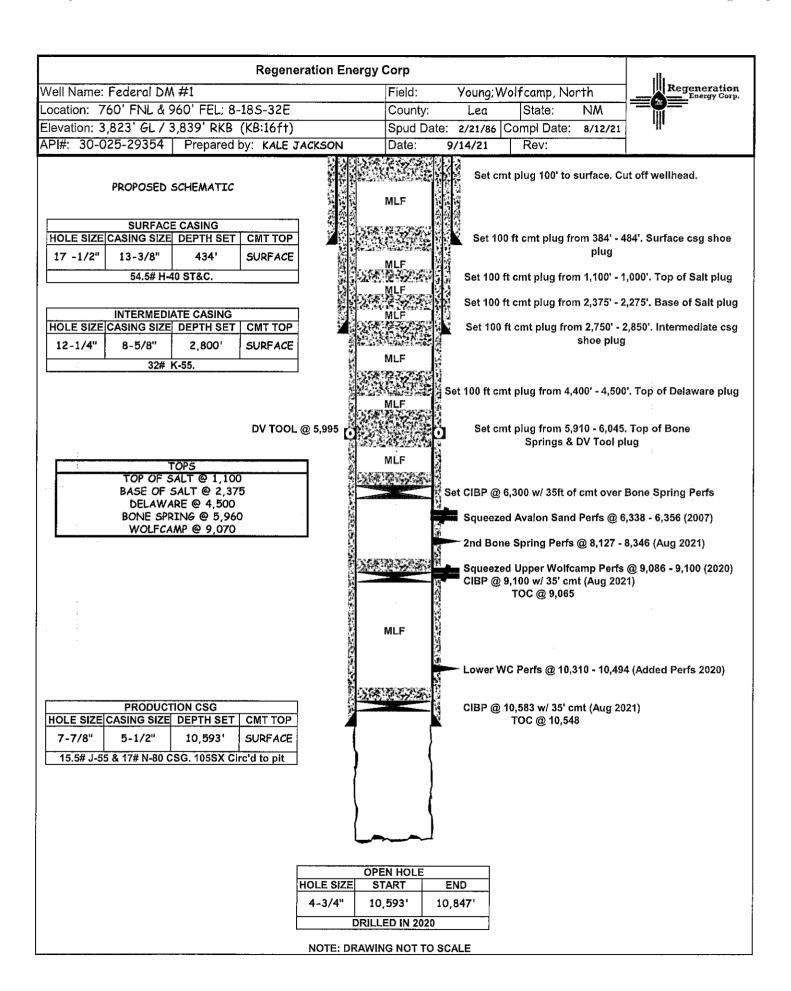
UNITED STATES

FORM APPROVED OMB No. 1004-0137

(June 2019)	DEI	PARTMENT OF TH	E INTERIOR			Expires: October 31, 2021			
BUREAU OF LAND MANAGEMENT						5. Lease Serial No. LC 064009 C			
	not use this	NOTICES AND RI form for proposa Use Form 3160-3	als to drill or to	o re-enter an		6. If Indian, Allottee o	or Tribe	Name	
	SUBMIT IN	TRIPLICATE - Other i	nstructions on pag	ne 2		7. If Unit of CA/Agre	ement,	Name and/or No.	
1. Type of Well Oil W	ell 🔲 Gas V	Well Other				8. Well Name and No	Feder	ral DM	
2. Name of Operator	Regeneration E	neray Corp				9. API Well No. 30-0:	 25- 2 93	54	
3a. Address PO BO			3b, Phone No.	(include area cod		10. Field and Pool or			
Artesia	NM 88210		(575) 736-35	35		Bone Spring			
4. Location of Well (760 FNL 960 FEI		R.,M., or Survey Descrip R32E	tion)	<u></u>		 Country or Parish Lea County, New)	
	12. CHE	ECK THE APPROPRIAT	TE BOX(ES) TO IN	DICATE NATUR	E OF NOTI	CE, REPORT OR OT	HER D	ATA	
TYPE OF SUI	3MISSION			TY	PE OF ACT	rion			
Notice of Inte		Acidize Alter Casing Casing Repair		oen raulic Fracturing Construction	Recla	uction (Start/Resume) unation mplete		Water Shut-Off Well Integrity Other	
Subsequent R	eport	Change Plans		and Abandon		orarily Abandon	ļ	, other	
Final Abandon	nment Notice	Convert to Inject	ction 🔲 Plug	Back	Wate	r Disposal			
completed. Final is ready for final 1) MIRU plugg 2) Receive ~6, 3) Set Class C 5) Set Class C 6) Set 100 ft C 7) Set Class C 8) Set Class C 9) Set Class C 10) Set Class C 11) Cut off wel 12) Reclaim lo Note: all mud !	Abandonment No inspection.) ing unit 300° of 2-7/8 the 6,300 ft to cove cement plug from plug from 2,375 plug from 1,100 lass C plug from C plug from 100 ilhead & install dication per BLM caden fluid (MLF)	bg (tubing was previous Bone Spring perfs. 5 cm; 5,910' - 6,045 to cove 1,2,750 - 2,850 to cove 1,2,750 - 2,275' to cove 1,2,750 - 1,000' to cove 1,384 - 484 to cover set to surface they hole marker COA) between plugs will counsed schematics	after all requirement usly pulled & sent to Spot 35ft class C p ocover both 50 ft a r top of Delaware ver intermediate ca r Base of salt section r Top of salt section surface casing sho ensist of 25 sxs per	o yard after unsulug. lug. above below DV asing shoe ion e	mation, have	e been completed and done Spring test). of Bone Spring		must be filed once testing has been rator has detennined that the site	
14. I hereby certify th	at the foregoing is	s true and correct. Name	(Printed/Typed)	Title La	~dn /20/2	<i>^</i>			
Signature	M.		<u> </u>	Date 9	120/2	.021			
J. L		THE SPA	CE FOR FED	ERAL OR ST	TATE OF	ICE USE			
Approved by									
				Title			Date		
certify that the applica	ant holds legal or	ched. Approval of this no equitable title to those ri- nduct operations thereon.	ghts in the subject le						
		43 U.S.C Section 1212, n				fully to make to any d	epartme	ent or agency of the United States	

(Instructions on page 2)





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

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**

CONDITIONS

Action 203413

CONDITIONS

Operator:	OGRID:
REGENERATION ENERGY, CORPORATION	280240
P.O. Box 210	Action Number:
Artesia, NM 88210	203413
	Action Type:
	[C-103] Sub. Plugging (C-103P)

CONDITIONS

Created By		Condition Date
john.harrison	None	5/8/2023