

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 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 ☒ Other2 Name of Operator
Havencor Operating Co. ✓ 102163a Address
904 Moore Ave. Roswell, NM 88201-11443b Phone No. (include area code)
575-626-4518

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

660' FSL & 2220' FEL Sec. 31, T17S-R30E

UL 0

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 20075 Lease Serial No
NM SWD-1182-A KC-28936D6 If Indian, Allottee or Tribe Name
NA7 If Unit or C/A Agreement, Name and/or No
NA8 Well Name and No.
Sand Hills SWD #1 ✓9 API Well No.
30-015-29104 ✓10 Field and Pool, or Exploratory Area
SWD; Wolfcamp 9613511 County or Parish, State
Eddy Co.

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input checked="" type="checkbox"/> Plug Back	<input checked="" 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.)

1182-A
In accordance w/SWD-1184-A set CIBP @12,280' plus 35' cmt. Set CIBP 11,000' plus 35' cmt. Set CIBP 10,100' plus 35' cmt. Run CBI to confirm reported original cmt gap 8,843'-10,000' behind 5-1/2" csg. Perf @9950' w/4 shots and 8,900' w/4 shots, suicide sqz w/200 sx for approx TOC 9,000'+. WOC 4 hrs. Run CBI to confirm job. Perf Wolfcamp 8,358'-8,862' (OA). Acidize w/approx 10,000 gal HCl 15%. Set injection pkr approx 8,300'. Test csg. Return to injection.

Accepted for record
NMOCDFE
9/13/11

Plugback already completed

ACCEPTED FOR RECORD

AUG 14 2011

J. Amos

BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE14 I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Kay Havenor

Title Geologist

Signature

Kay Havenor

Date

06/28/2011

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)

RECEIVED
AUG 18 2011
NMOCDFE
ARTESIA