OCD. Artesia

Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED OMB No 1004-0137 Expires July 31, 2010

5. Lease Serial No NM-121474

6 If Indian, Allottee or Tribe Name

	his form for proposals : ell. Use Form 3160-3 (A					
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7 If Unit of CA/Agreement, Name and/or No		
1 Type of Well	······································					
✓ Oıl Well ☐ Gas Well ☐ Other				8 Well Name and No Copperhead "31" Fed Com #1H		
2 Name of Operator OGX Resources LLC			9. API Well No 30-015-38532			
P O Box 2064		3b Phone No. (include area co 432-685-1287	de) 10. Field and Pool or Exploratory Area Delaware River-Bone Spring			
4 Location of Well (Footage, Se	c., T,R,M, or Survey Description	1)		11 Country or Parish,	State	
480' FSL & 480' FEL, Sec. 31 T26S R29	T26S, R30E (BHL)		Eddy County, New M	Mexico		
12	CHECK THE APPROPRIATE BO	OX(ES) TO INDICATE NATUR	E OF NOTIC	CE, REPORT OR OTHI	ER DATA	
TYPE OF SUBMISSION	OF SUBMISSION			TYPE OF ACTION		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat		duction (Start/Resume)		
✓ Subsequent Report	Casing Repair	New Construction		omplete	Other Completion Sundry	
Final Abandonment Notice	Change Plans Convert to Injection	☐ Plug and Abandon☐ Plug Back		porarily Abandon er Disposal		
Attach the Bond under which following completion of the testing has been completed determined that the site is reasonable to the state of the state	Final Abandonment Notices must dy for final inspection) with a Halliburton sleeve syste bls Crosslink gel & 3,774,619# & & prepare to production test. Test. 307 BO, 3217 MCF, 250	covide the Bond No on file with E ion results in a multiple completic be filed only after all requirements. This lateral portion of wellf of 100 mesh & 20/40 sd.	BLM/BIA For or recompts, including	Required subsequent repoletion in a new interval, reclamation, have been 048'- 11,392' was frac	orts must be filed within 30 days a Form 3160-4 must be filed once completed and the operator has	
•	ig is true and correct. Name (Prime					
Shelley Bush	Title Regulati	Title Regulatory Analyst				
Signature All	y Dush	Date 09/12/20	011			
	THIS SPACE	FOR FEDERAL OR ST	ATE OF	FICE USE		
Approved by						
Conditions of approval, if any, are a that the applicant holds legal or equi				<u>}</u>	Date	

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 fictitious or fraudulent statements or representations as to any matter within its jurisdiction

(Instructions on page 2)

Accepted for recommendations as to any matter within its jurisdiction

entitle the applicant to conduct operations thereon