Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

OCD- Artesia FORM APPROVED

	O. 1004-0135 July 31, 2010
ease Serial No.	

SUNDRY NOTICES AND REPORTS ON WELLS		NMLC048491B 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.									
SUBMIT IN TRIPLICATE - Other instructions on reverse side.		7. If Unit or CA/Agreement, Name and/or No.							
1 Type of Well			8. Well Name and No.						
Oil Well Gas Well Other			SAUNDERS B 3						
2 Name of Operator Contact: CARIE STOKER ALAMO PERMIAN RESOURCES E-Mail: cstoker@alamoresources.com			9: API Well No. 30-015-22725						
3a. Address 415 WEST WALL STREET SUITE 500 MIDLAND, TX 79701 3b. Phone No. (include area code) Ph: 432-897-0673				10. Field and Pool, or Exploratory RED LAKE; QUEEN-GRAYB-SA					
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) RECEIVED				7	11. County or Parish, and State				
Sec 13 T17S R27E NENE 980FNL 990FEL			DEC 3 0 2011			EDDY COUNTY, NM			
12. СНЕСК АРРИ	ROPRIATE BOX(ES) TO	O INDICAT	MAFURE	AF MOS	l ∂ e, ri	EPORT, OR OTHE	R DAT	A	
TYPE OF SUBMISSION			TY	PE OF AC	TION	········			
Notice of Intent	Acidize	□ Dee	pen		Product	ion (Start/Resume)	□ W:	ater Shut-Off	
Subsequent Report	☐ Alter Casing	_	cture Treat		Reclam			ell Integrity	
_	Casing Repair	_	v Constructio		Recomp		□ Ot	her	
Final Abandonment Notice	☐ Change Plans ☐ Convert to Injection		g and Abando	_		arily Abandon			
13 Describe Proposed or Completed Op	_	_	g Back	-	Water I				
If the proposal is to deepen directions Attach the Bond under which the wo following completion of the involved testing has been completed. Final Al determined that the site is ready for f	ally or recomplete horizontally, rk will be performed or provide l operations. If the operation re bandonment Notices shall be fi	, give subsurface e the Bond No. o esults in a multip	locations and in file with BLI le completion	measured a M/BIA. Re	and true ve equired su etion in a	ertical depths of all pertir bsequent reports shall be new interval, a Form 316	nent mark filed wit 50-4 shall	ers and zones hin 30 days be filed once	
PROPOSED P&A PROCEDU	RE:				orr	ATTACHED E	ΛD		
NOTIFY BLM 24 HRS PRIOR TO PU RU.			SEE ATTACHED FOR						
RU PU, INSTALL BOP AND WITH WITH TUBING TO 1,420' (TD).				CONDITIONS OF APPROVAL					
CLEAN OUT HOLE TO TD IF	NECESSARY.								
POOH WITH TUBING FILLIN CEMENT.	G OPEN HOLE (1,403' T	O 1,420') AN	D 4 1/2" CA	SING TO	SURF/	ACE WITH 137 SX (OF .		
WOC AND TAG CEMENT.					F	RECLAMATION PROCEDURE ATTACHED			
14 I hereby certify that the foregoing is	true and correct. Electronic Submission # For ALAMO PE Committed to AFMSS for	RMIAN RESO	URCES, sen	it to the C	arisbad				
Name (Printed/Typed) CARIE ST		processing by	1 '	•		FAIRS COORDINAT	OR		
	ı								
Signature (Electronic S	·			/20/2011					
	THIS SPACE FO	OR FEDERA	AL OR STA	ATE OFF	FICE U	SE			
Approved By James (? Omo		Title	SEP	5			/ Z-Z<i>B-U</i> Date	
Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conditions.	uitable title to those rights in th	es not warrant or the subject lease	Office 2	CED					
Title 18 U.S. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it statements or representations a	a crime for any pas to any matter v	person knowing within its juriso	gly and will liction.	lfully to n	nake to any department o	r agency	of the United	

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

Additional data for EC transaction #126315 that would not fit on the form

32. Additional remarks, continued

TOP OFF CEMENT TO SURFACE.

REMOVE BOP.

GET APPROVAL FROM BLM BEFORE RD PU.

NOTIFY BLM 4 HOURS PRIOR TO WELLHEAD CUT OFF (WH SHOULD BE CUT OFF WITHIN 10 DAYS OF PLUGGING JOB).

CUT OFF WELLHEAD AND INSTALL A P&A MARKER.

RECLAIM LOCATION.

FILE SUBSEQUENT REPORT OF ABANDONMENT, FORM 3160-5, TO BLM WITHIN 30 DAYS OF PLUGGING WELL.

ATTACHED: NOTICE OF INCIDENTS OF NONCOMPLIANCE; PRE & POST WELLBORE DIAGRAM