Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

N.M. OIL CONSERVATION DIVISION 811 S. FIRST STREET

FORM APPROVED OMB No. 1004-0137

Expires: October 31, 2014 ARTESIA, N. 58220 Serial No. NM-100542

| 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. | | | , | 6. If Indian, Allottee or Tribe Name N/A | |
|--|--|---|--|---|--|
| SUBMIT IN TRIPLICATE – Other instructions on page 2. | | | · · | 7. If Unit of CA/Agreement, Name and/or No. | |
| 1 Type of Well ☐ Oil Well ☐ Gas Well ☐ Other | | | 8. Well Name and No. | N/A 8. Well Name and No. PAISANO FEDERAL #1 | |
| 2. Name of Operator JALAPENO CORPORATION | | | 9. API Well No. | | |
| 3a. Address PO BOX 1608, ALBUQUERQUE, NM 87103 3b. Phone No. (include area code) 505-242-2050 | | | 1 | 10. Field and Pool or Exploratory Area WOLF LAKE SAN ANDRES, SOUTH | |
| 4. Location of Well (Footage, Sec., T., | | 11. County or Parish, State CHAVES COUNTY, NM | | | |
| 12. CHEC | CK THE APPROPRIATE BOX(ES) T | O INDICATE NATURE OF | NOTICE, REPORT OR OTHE | R DATA | |
| TYPE OF SUBMISSION | TYPE OF SUBMISSION TYPE OF ACT | | | | |
| Notice of Intent ✓ Subsequent Report | Acidize Alter Casing Casing Repair Change Plans Convert to Injection | Deepen Fracture Treat New Construction Plug and Abandon Plug Back | Production (Start/Resume) Reclamation Recomplete Temporarily Abandon | Water Shut-Off Well Integrity Other | |
| Attach the Bond under which the of following completion of the involvesting has been completed. Final determined that the site is ready for 1/24/13 - 3G WELL SERVICES 1/25/13 - 3G WELL SERVICES 1/26/13 - WITH NEW TUBING, 1/29/13 - WRH ARRIVED AT LC 2/3/13 - PACE SETTER ARRIVED 2228'-2231' AND 2237 2/5/13 - 3G WELL SERVICES | , , | Bond No. on file with BLM/I in a multiple completion or a lay after all requirements, income of the second | BIA. Required subsequent reports of the completion in a new interval, and interval, an | orts must be filed within 30 days a Form 3160-4 must be filed once completed and the operator has ONS DOWN HOLE(2205'-2230'). THEN PREFORATED FROM 15% HCL ACID. | |
| 14. I hereby certify that the foregoing is to | rue and correct. Name (Printed/Typed) | 7.900 | NMOC | D ARTESIA | |
| H. EMMONS YATES, II | | Title VICE PRESID | PENT | | |
| Signature 4. Coming - V | \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\ | Date 03/28/2013 | | | |
| ACCEPTED F | OF REGION DE FOR FI | EDERAL OR STATE | OFFICE USE | | |
| Approved by /S/ DAV APR 1 | ID H. GLASS 8 2013 | Title | Da | ate | |
| Conditions of approval, if any, are attached that the applicant holds legal ANTED A entitle the applicant to conduct operations | tlep thesights in the subject lease whithereon. | nt or certify ich would Office | ROSWELLFI | ELD OFFICE | |
| Title 18 U.S.C. Section 1001 and Title 43 fictitious or fraudulent statements or repre | U.S.C. Section 1212, make it a crime for | | fully to make to any department | or agency of the United States any false | |