

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014

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.

5. Lease Serial No. NM-100542
6. If Indian, Allottee or Tribe Name N/A

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator JALAPENO CORPORATION

3a. Address P.O. BOX 1608
ALBUQUERQUE, NEW MEXICO 87103

3b. Phone No. (include area code) 505-242-2050

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC. 12, T-9S, R-27E. 334' FSL & 938' FEL

7. If Unit of CA/Agreement, Name and/or No. N/A

8. Well Name and No. ACIETE NEGRA #4

9. API Well No. 30-005-62245

10. Field and Pool or Exploratory Area
Wolf Lake San Andres

11. County or Parish, State
CHAVES COUNTY, NEW MEXICO

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input 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 checked="" 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 checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input 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 recomple 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. If the operation results in a multiple completion or recomple 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 determined that the site is ready for final inspection.)

8/26/15 NOTIFIED THE BLM OF OUR INTENT TO PLUG THE ACIETE NEGRA #4 WELL.

5 1/2" casing was pulled @ 1959'

ACCEPTED FOR 6 MONTH PERIOD
ENDING MAR 04 2016

9/1-4/15 TAGGED BOTTOM AND PROCEEDED TO FILL HOLE WITH 45 SACKS OF CEMENT. WOC

TAGGED TOP OF BOTTOM PLUG AT 2169'. FILLED HOLE WITH SALT WATER GEL FROM 2169' to 1700'.

FILLED HOLE WITH 120 SACKS OF 2% CALC2 CEMENT IN ORDER TO CEMENT FROM 1700' TO 1500'. WOC

TAGGED MIDDLE PLUG AT 1500' AND THEN PUT SALT WATER GEL SPACER IN FROM 1500' to 400'.

WE THEN CEMENTED FROM 400' TO SURFACE USING 110 SACKS OF 2% CALC2 CEMENT.

NM OIL CONSERVATION
ARTESIA DISTRICT
NOV 30 2015

WITNESSED BY OSCAR TORRES OF BLM.

Accepted for record
NMOCD
12/1/15

RECEIVED

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Jun Barrack

Title Oil and Gas Operations Associate

Signature *Jun Barrack*

Date 11/18/2015

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by _____ Title _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify case which would _____ Office _____

NOV 24 2015
BUREAU OF LAND MANAGEMENT
CARLSBAD FIELD OFFICE

Accepted As To Plugging Of The Well Bore.
Liability Under Bond Is Retained Until
Surface Restoration Is Completed.

Time for any person knowingly and willfully to make to any department or agency of the United States any false, in its jurisdiction.