

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT  
ARTESIA DISTRICT

NMOC

FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

**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.  
NMNM113944

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on page 2**

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. COTTONWOOD 29-32 FED COM 2BS 2H
2. Name of Operator CHISHOLM ENERGY OPERATING, LLC Contact: JENNIFER ELROD Email: jelrod@chisholmenergy.com		9. API Well No. 30-015-43704
3a. Address 801 CHERRY ST., SUITE 1200 UNIT-20 FORT WORTH, TX 76102	3b. Phone No. (include area code) Ph: 817-953-3728	10. Field and Pool or Exploratory Area WELCH; BONE SPRINGS
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 29 T26S R26E Mer NMP NWNE 150FNL 1130FEL 32.019955 N Lat, 104.319680 W Lon		11. County or Parish, State EDDY COUNTY, NM

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"/> Hydraulic Fracturing	<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 checked="" 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 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 recomplete 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 recompletion 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.

**\*\*INTERMEDIATE/PRODUCTION/RIG RELEASE SUNDRY\*\***

08/17/2017-DRILL 12 1/4" HOLE TO 1630' NOTIFIED BLM 11:00 PM FOR UPCOMING CMNT JOB.  
08/18/2017-RAN 38 JTS OF 9 5/8", 36#, J55 LTC CASING, SET AT 1617'; CMNT 9 5/8" CSG W/328 SXS CLASS C LEAD CMNT @ 2.51 YIELD; PUMP 100 SXS CLASS C TAIL CMNT @ 1.33 YIELD. GOOD RETURNS W/111 SXS CMNT TO SURFACE. WOC 10 HOURS  
08/19/2017-09/11/2017-DRILL 8 3/4" HOLE TO 13960' TD ✓  
09/13/2017-RAN 321 JTS OF 5 1/2", 17#, P110 BTC CSG, SET @13944' TD  
09/14/2017-CMNT 5 1/2" CSG W/455 SXS ALLIED FEATHERWEIGHT BLEND 2 LEAD CMNT @3.87 YIELD, PUMP 2025 CLASS H PREMIUM TAIL CMNT @ 1.15 YIELD W/NO CMNT TO SURFACE  
\*\*\*NOTIFIED BLM\*\*\*  
09/14/2017-PUMPED 500 SXS CLASS H PREMIUM CMNT @ 1.19 YIELD TO COVER FROM SURF TO LOST CIRC ZONE.  
09/15/2017-RIG RELEASE @6:00 AM

Accepted for record - NMOC

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #389644 verified by the BLM Well Information System  
For CHISHOLM ENERGY OPERATING, LLC, sent to the Carlsbad  
Committed to AFMSS for processing by PRISCILLA PEREZ on 09/26/2017 ()

Name (Printed/Typed) JENNIFER ELROD

Title SENIOR REGULATORY TECH

Signature (Electronic Submission)

Date 09/25/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	Date 10/1/2017
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.		
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)

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