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Form 3160-5 (June 2015) UNITED STATES MAY 1 6 2018 DEPARTMENT OF THE INTERIOR BUREAU OF LAND MOISTRICTED ARTESIA O.C.D.					FORM APPROVED OMB No. 1004-0137 Expires: January 31, 2018 5. Lease Serial No. NMNM110829				
									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.
SUBMIT IN TRIPLICATE - Other instructions on page 2					7. If Unit of CA/Agreem	ent, Name and/or	r No.		
1. Type of Well Oil Well Gas Well Other					8. Well Name and No.	8. Well Name and No. JITTERBUG FEDERAL 1			
2. Name of Operator Black Mountain Operating LLC					9. API Well No. 20.015	9. API Well No. 30-015-36121			
			nclude area cod	e)		10. Field and Pool or Exploratory Area			
Fort Worth, Texas 76102 (817)			1		MALAGA; DELAWARE				
 Location of Well (Footage, Sec., T.R.,M. or Survey Description) 1980' FNL & 1980' FEL; Section 24, Township 24 South, Range 28 East 					11. Country or Parish, State EDDY County, New Mexico				
	ECK THE APPROPRIATE B	OX(ES) TO INDI	ICATE NATURI	E OF NO	TICE, REPORT OR OTHE	R DATA			
TYPE OF SUBMISSION	•		TY	PE OF A	CTION				
✓ Notice of Intent	Acidize		ulic Fracturing	Re	oduction (Start/Resume)	Water Shut-			
Subsequent Report	Casing Repair		Construction nd Abandon		complete mporarily Abandon	Other			
Final Abandonment Notice	Convert to Injection	Plug B	ack	Wa	ater Disposal				
the Bond under which the work w completion of the involved operat completed. Final Abandonment N is ready for final inspection.) CHANGE OF OPERATOR EF FROM: BLACK MOUNTAIN O 500 MAIN STREET, S FORT WORTH, TEX TO: MARATHON OIL PEF 5555 SAN FELIPE ST HOUSTON, TX 77050 BOND COVERAGE: BLM BO PER NTL89, MARATHON OIL CONCERNING OPERATION	ions. If the operation results i otices must be filed only after FFECTIVE JULY 1, 2017 OPERATING (194849) SUITE 1200 AS 76102 RMIAN LLC. (372098) IREET 5 ND ON FILE NO WYB002 L PERMIAN LLC. ACCEPT	n a multiple comp all requirements. 107 TS ALL APPLICA	ABLE TERMS,	Car condition	a new interval, a Form 316 ave been completed and the 5 - 1 8 - 18 for record - NMOO CISBAR Fiel OCD Art	o-4 must be filed operator has dete CD Id Off tesia	once testing has be ennined that the sit		
14. I hereby certify that the foregoing is true and correct. Name (Printed Typed)									
MELISS	Title REGULATORY COMPLIANCE REPRESENTATIVE								
Signature	5	1	Date 8	174	2017	OVED			
· 0	> THE SPACE	FOR FEDE	RAL OR ST	ATE O	FICE	UVED			
Approved by									
Conditions of approval, if any, are atlact certify that the applicant holds legal or which would entitle the applicant to co	se Office		MAY	0 2018					
Title 18 U.S.C Section 1001 and Title 43 U S C Section 1212, make it a crime for any person knowingly and w any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction					IIIful BUREAL DPY CAN	IDMMANAGEN	Me United Stat		
(Instructions on page 2)					OTAL DOUD I				