NMOCD

rtesia	PORM APPROVE

	UNITED STATES DEPARTMENT OF THE	INTERIOR	Aitesi	FORM APPROVED OM B No. 1004-0135 Expires: January 31, 2004	
	BUREAU OF LAND MAN			5. Lease Serial No.	
,	NOTICES AND REF			6. If Indian, Allottee or Tribe Name	
abandoned wa	ell. Use Form 3160 - 3 (A	(PD) for such pr	oposals.		
SUBMIT IN TRIPLICATE- Other Instructions on reverse side.		7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well Gas Well Cother		NMNM71065X A 8. Well Name and No.			
2. Name of Operator SEGURO OI	L AND GAS, LLC	··	· · · · · · · · · · · · · · · · · ·	WEST SQUARE LAKE UNIT #12 9. API Well No.	
3a. Address 3b. Phone No. (Include area code) PO BOX 3176, MIDLAND, TX 79702 432-219-0740		30-015-25335			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		10. Field and Pool, or Exploratory Area SQUARE LAKE; GRAYSBURG-SAN AP			
660 FSL & 1295 FEL			11. County or Parish, State		
SECTION 36, TOWNSHIP 16S, RANGE 30E			EDDY COUNTY, NM		
12. CHECK AP	PROPRIATE BOX(ES) TO	INDICATE NATUI	RE OF NOTICE, RE	EPORT, OR OTHER DATA	
TYPE OF SUBMISSION		TY	PE OF ACTION		
Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production (Star	Well Integrity	
Subsequent Report	Casing Repair Change Plans	New Construction Plug and Abandon	Recomplete Temporarily Aba	Other Change of Operator	
Final Abandonment Notice	Convert to Injection	Plug Back	Water Disposal	· · · · · · · · · · · · · · · · · · ·	
testing has been completed. Fin determined that the site is ready This is notification that Seguro Oil and Gas LL	al Abandomment Notices shall be f for final inspection.) Seguro Oil and Gas, LLC	iled only after all require is taking over oper ots all applicable to	ments, including reclama	n a new interval, a Form 3160-4 shall be filled once ation, have been completed, and the operator has tipulations and restrictions concerning	
Bond Coverage: BLM Bond Fite No.: NMB001445					
Channe of Onestor Effective: 08/01/2017					
Former Operator: J Cleo Thompson (11181) Greened for record NMOCD Accepted for record NMOCD					
	Yesthan			DISTRICT II-ARTESIA O.C.D.	
14. Thereby certify that the foreg Name (Printed/Typed)	going is true and correct	1	ΓΛ	COEDED FOR	
DONNA M STUR	RDIVANT ₍₎	Title R	EGULATORY CLER	CCEPTED FOR RECORDY	
Some Wornay	n Sturdina	nt Date	0.5	5/04/2018	
	THIS SPACE FOR F	EDERAL OR S	TATE OFFICE	U\$E/MAY 9 49/8 //	
Approved by Conditions of approval, if any, are a certify that the applicant holds legal which would entitle the applicant to	or equitable title to those rights in conduct operations thereus.	oes not wanted or the subject lease	Office	BUREAU PAND MANAGEMENT CARLSBAD FIELD OFFICE	
Title B USC. Section 1901 and Title States any false, fictitions or familials	49 U.S.C. Section 1212, make it a and statements or representations of	crime for any peason kr s to any matter within ()	owingly and willfully to	make to any department or agency of the United	
(Instructions on page 2)			1		