Form 3160-5 (June 2015)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

Artesia

FORM APPROV	ED
OMB NO. 1004-0	137
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.					NMLC068474 6. If Indian, Allottee or Tribe Name		
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit or CA/Agreement, Name and/or No.			
1. Type of Well Gas Well Other					Well Name and No. DRICKEY QUEEN SAND UNIT 019		
Name of Operator Contact: CARIE STOKER REMNANT OIL OPERATING LLC E-Mail: carie@stokeroilfield.com				9. API Well No. 30-005-00976			
3a. Address P.O. BOX 5375 MIDLAND, TX 79704 3b. Phone No. (include area code) Ph: 432-695-6997					10. Field and Pool or Exploratory Area CAPROCK; QUEEN		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 3 T14S R31E 1990FNL 660FWL					11. County or Parish, State CHAVES COUNTY, NM		
12. CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE O	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION			TYPE OF	ACTION			
☐ Notice of Intent	☐ Acidize	☐ Dee	pen	☑ Producti	on (Start/Resume)	■ Water Shut-Off	
. —	☐ Alter Casing	☐ Hyd	raulic Fracturing	☐ Reclama	ation	■ Well Integrity	
Subsequent Report	□ Casing Repair	□ Nev	lew Construction		lete	□ Other	
☐ Final Abandonment Notice	□ Change Plans	Plug	ug and Abandon		arily Abandon		
	☐ Convert to Injection ☐ Plug Back ☐ Wat		□ Water D	isposal			
following completion of the involved testing has been completed. Final Ab determined that the site is ready for fi MAY 30 2018 PERFORMED ELECTRICAL 1	andonment Notices must be filed nal inspection.	d only after all	requirements, includi	mpletion in a n ing reclamation	ew interval, a Form 3160, have been completed a	0-4 must be filed once and the operator has	
	OCT 0 1 2018						
DISTRICT II-ARTESIA O.C.D.							
		····					
14. I hereby certify that the foregoing is Name (Printed/Typed) CARIE ST	For REMNANT O Committed to AFMSS for p	IL OPERATI	NG LLC, sent to the JENNIFER SANC	he Roswelf HEZ on 06/0	7/2018 ()		
Name (Frimedi Typed) CARIE 51	UNEK		Title REGAF	FAIRS CDC	DRDINATOR // \	///	
Signature (Electronic S	ubmission)		Date 06/07/26	GEPTED	FOR RECOR		
	THIS SPACE FO	R FEDERA	L OR STATE	FFICE US	SE /	XXA	
Approved By Conditions of approval, if any, are attached certify that the applicant holds legal or equivalent would entitle the applicant to conduct the second of the se	itable title to those rights in the s ct operations thereon.	subject lease			NO MANAGEMENT FIELD OFFICE	Tale Tale	
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent s	tatements or representations as to	o any matter w	thin its jurisdiction.	willfully to mal	ke to any degartment or	igency of the United	

(Instructions on page 2)

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