Form \$160-5 - (June 2015)

UNITED STATES IIII DGD Actosia

FORM APPROVED OMB NO. 1004-0137

DE	Expires: January 31, 2018						
BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill and the literate SIAO.C.D. abandoned well. Use form 3160-3 (APD) for such proposals.					5. Lease Serial No. NMNM81953		
					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.		
Type of Well					8. Well Name and No. GLOW WORM ALX FEDERAL 15H		
Name of Operator					9. API Well No. 30-015-36368-00-S1		
3a. Address 104 S 4TH STREET ARTESIA, NM 88210	3b. Phone No Ph: 432-68	. (include area code) 6-3658			0. Field and Pool or Exploratory Area LOS MEDANOS-DELAWARE		
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)					11. County or Parish, State		
Sec 4 T23S R31E NWNE 200FNL 1830FEL					EDDY COUNTY, NM		
12. CHECK THE AF	PPROPRIATE BOX(ES)	TO INDICA	TE NATURE OI	F NOTICE,	REPORT, OR OTH	IER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION						· · · · · · · · · · · · · · · · · · ·
Notice of Intent	Acidize	□ Dee		_	ion (Start/Resume)	☐ Water :	
☐ Subsequent Report	☐ Alter Casing ☐ Subsequent Report ☐ Casing Repair		- ;		☐ Reclamation ☐ Recomplete		
			- ·		·		
☐ Final Adalidoliment Notice	Convert to Injection			☐ Temporarily Abandon ☐ Water Disposal			
If the proposal is to deepen directions Attach the Bond under which the wor following completion of the involved testing has been completed. Final Atdetermined that the site is ready for fit EOG PROPOSES TO PLUG A	ck will be performed or provide operations. If the operation repandonment Notices must be filinal inspection. AND ABANDON THIS WI	the Bond No. or sults in a multipled only after all ELL USING T	in file with BLM/BIA e completion or recordence requirements, include the ATTACHED	Required sulmpletion in a ring reclamation PROCEDU PROCEDU S C	bsequent reports must be new interval, a Form 316 n, have been completed a RE. EE ATTACHE ONDITIONS (filed within 3:0-4 must be fi and the operator.	0 days iled once or has
Below ground	d level o	Dy A	Sole n	Nark	er Reg.	eired	NOVAL
I hereby certify that the foregoing is Commi Name (Printed/Typed) KAY MAD	#Electronic Submission For EOG Y I itted to AFMSS for process	RESOURCES	NC, sent to the C RAH MCKINNEY o	arlsbad	9 (19DLM0416SE)		
Signature (Electronic Submission) Date 04/16/2019							
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved By	a Q. On		Title S	1CT		. Date	-8-19

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.