

OCD Artesia

Form 3160-5  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED  
OMB NO. 1004-0135  
Expires: July 31, 2010

**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 reverse side.**

|                                                                                                                                  |  |                                                           |
|----------------------------------------------------------------------------------------------------------------------------------|--|-----------------------------------------------------------|
| 1. Type of Well<br><input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other |  | 5. Lease Serial No.<br>NMNM90807                          |
| 2. Name of Operator<br>SM ENERGY COMPANY                                                                                         |  | 6. If Indian, Allottee or Tribe Name                      |
| 3a. Address<br>3300 N "A" STREET BLDG 7-200<br>MIDLAND, TX 79705                                                                 |  | 7. If Unit or CA/Agreement, Name and/or No.               |
| 3b. Phone No. (include area code)<br>Ph: 432-688-1709<br>Fx: 432-688-1701                                                        |  | 8. Well Name and No.<br>OSAGE FEDERAL 008                 |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br>Sec 34 T19S R29E 1980FNL 1980FEL                       |  | 9. API Well No.<br>30-015-26089                           |
|                                                                                                                                  |  | 10. Field and Pool, or Exploratory<br>PARKWAY;BONE SPRING |
|                                                                                                                                  |  | 11. County or Parish, and State<br>EDDY COUNTY, NM        |

12. CHECK 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"/> Fracture Treat   | <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       | Venting and/or Flaring                    |
|                                                       | <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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

SM ENERGY BEGAN FLARING THIS MORNING DUE TO DCP REPLACING THE BOTTOMS-SIDE CRYOGENIC REBOILER.

WE FLARED 2236 <sup>MCF</sup> MFC AND WILL SUBMIT THIS ON THE C-115 FORM.

PLEASE SEE LIST BELOW OF ALL WELLS IMPACTED WITH THE ONE SUBMITTED:

- Lease Name UL:Sec:Township:Range API Number Location County
- OSAGE FEDERAL #010 H-34-19S-29E 30-015-26178 1980 FNL & 660 FEL Eddy County
- OSAGE FEDERAL #013 C-34-19S-29E 30-015-26216 660 FNL & 1980 FWL Eddy County
- OSAGE FEDERAL #015 F-34-19S-29E 30-015-26271 1650 FNL & 2310 FWL Eddy County
- OSAGE FEDERAL #016 J-34-19S-29E 30-015-26283 2310 FSL & 1650 FEL Eddy County



Accepted for record  
LMDele NMOC D 8/21/13

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

Electronic Submission #212513 verified by the BLM Well Information System  
For SM ENERGY COMPANY, sent to the Carlsbad  
Committed to AFMSS for processing by KURT SIMMONS on 07/12/2013 ()

|                                      |                        |
|--------------------------------------|------------------------|
| Name (Printed/Typed) VICKIE MARTINEZ | Title ENGINEER TECH II |
| Signature (Electronic Submission)    | Date 07/02/2013        |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

|                                                                                                                                                                                                                                                           |        |             |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------|-------------|
| Approved By                                                                                                                                                                                                                                               | Title  | Date        |
| 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 | AUG 19 2013 |

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 any statement or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

BUREAU OF LAND MANAGEMENT  
CARLSBAD FIELD OFFICE