

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM 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 <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMNM91502
2. Name of Operator NADEL & GUSSMAN PERMIAN LLC		6. If Indian, Allottee or Tribe Name
Contact: DAVID A EYLER E-Mail: DEYLER@MILAGRO-RES.COM		7. If Unit or CA/Agreement, Name and/or No.
3a. Address 601 NORTH MARIENFELD SUITE 508 MIDLAND, TX 79701	3b. Phone No. (include area code) Ph: 432-687-3033	8. Well Name and No. BULLSEYE 1
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 26 T21S R22E SENE 1880FNL 660FEL		9. API Well No. 30-015-28919-00-S1
		10. Field and Pool, or Exploratory LOAFER DRAW
		11. County or Parish, and State 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input checked="" type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<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 recompletable 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 recompletable 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.)

12/24/14: CIRC. WELL W/ PXA FLUID; PUMP 50 SXS.CMT. @ 9,077'(PER BLM); WOC.

12/29/14: TAG CMT. @ 8,680'(OK'D BY BLM); PUMP 30 SXS.CMT. @ 7,635'-7,465'.

12/30/14: PERF. SQZ. HOLES @ 6,390',6,300',6,270',6,250'(PER BLM); PUMP 45 SXS.CMT. @ 6,450'(PER

BLM); WOC X TAG CMT. @ 5,841'.

01/04/15: PERF. X SQZ. 60 SXS.CMT. @ 4,748'; WOC.

01/05/15: TAG CMT. @ 4,498'(OK'D BY BLM); CUT 5-1/2" CSG. @ 2,130' - NOT FREE.

01/06/15: MIX X SQZ. 120 SXS.CMT. THRU CSG. CUT @ 2,130'; WOC.

01/07/15: TAG CMT. @ 1,914'; PUMP 25 SXS.CMT. W/ 2%CACL @ 1,914'(PER BLM); WOC X TAG CMT. @ 1,650';

PERF. X SQZ. 100 SXS.CMT. @ 500'; WOC.

01/08/15: TAG CMT. @ 363'; PERF. X CIRC. TO SURF., FILLING ALL ANNULI, 65 SXS.CMT. @ 63'-3'; DIG.

OUT X CUT OFF WELLHEAD 3' B.G.L.; VERIFY CMT. TO SURF. ON ALL ANNULI; WELD ON STEEL PLATE TO CSGS.

X INSTALL DRY HOLE MARKER.

**Accepted as to plugging of the well bore.
Liability under bond is retained until
Surface restoration is completed.****RECLAMATION
DUE 7-7-15**

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #287489 verified by the BLM Well Information System For NADEL & GUSSMAN PERMIAN LLC, sent to the Carlsbad Committed to AFMSS for processing by JAMES AMOS on 01/12/2015 (14JA1160SE)	
Name (Printed/Typed) DAVID A EYLER	Title AGENT
Signature (Electronic Submission)	Date 01/09/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ACCEPTED	JAMES A AMOS Title SUPERVISORY PET	Date 01/12/2015
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 Carlsbad

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.

Additional data for EC transaction #287489 that would not fit on the form

32. Additional remarks, continued

WELL PLUGGED AND ABANDONED 01/08/15.