

UNITED STATES DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT
N.M. Oil Cons. DIV-Dist. 2
1301 W. Grand Avenue
Artesia, NM 88210

FORM APPROVED
OMB NO. 1004-0135
Expires January 31, 2004

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

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

LCX Energy, LLC

3a. Address

110 N. Marienfeld, Ste. 200, Midland, TX 79701

3b. Phone No. (include area code)

432 687-1575

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SL: 660' FNL & 760' FWL Sec 6, T17S, R25E

5. Lease Serial No.

NM-93181

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

1725 Fed Com #61

9. API Well No.

30-015-34340

10. Field and Pool, or Exploratory Area

Cottonwood Creek; Wolfcamp

11. County or Parish, State

Eddy County, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|--|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other <u>Spud well &</u> |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | <u>ran casing.</u> |
| <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 recompleat 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 final site is ready for final inspection.)

10/7/05 Spud well w/ 17-1/2" hole. Ran 9 jts 13-3/8" 48# H-40 ST&C casing. Casing set @ 389'. Cemented as follows: Pump 20 bbls FH20 spacer. Mix & pump 77sks-205 bbls of lead slurry & 47 sks-200 bbls tail slurry & displace 55 bbls of FH20. Bumped plug 500 psi over float. Held 30 min. No returns on cement. WOC.

Cement 1" - 1st stage - Plug @ 160'. Mix & pump down 10 bbls @ 14.8#. WOC.
Cement 1" - 2nd stage - Plug @ 70'. Mix & pump down 20 bbls @ 14.8# & circ 10 bbls to pit. WOC.
Install wellhead. Test to 1500 psi. Held 30 min.

10/10/05 Ran 30 jts 9-5/8" 36#, J55, ST&C csg. Tag bottom @ 1296' TVD & set csg @ 1294' TVD. Cement as follows: Mix & pump 20 bbls FW gel spacer. Mix & pump lead slurry of 188 bbls & 650 sks of Class RFC (10-2-A) + additives @ 14.2# cement. Mix & pump tail slurry of 71 bbls & 300 sks of Class "C" + additives @ 14.8# cement. Drop plug & diplace w/ 96.7 bbls of FH20. Bumped plug @ 500 psi. Float held ok. 145 bbls of lead ret'd to pit. WOC. Install wellhead & test to 1500 psi. Held 30 min. NU BOP & choke manifold. Test BOP & all surface equipment to 2000 psi. All tested ok.

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Lisa Hunt

Title

Regulatory Analyst

Date 10/12/05

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

OCT 20 2005

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

ALEXIS C. SWOBODA