

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NMOCD
Artesia

FORM APPROVED
OMB NO. 1004-0137
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.

5. Lease Serial No. NMNM0115465A
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No.
8. Well Name and No. TOLES FEDERAL 1
9. API Well No. 30-005-60782-00-S1
10. Field and Pool or Exploratory Area DIAMOND MOUND-MORROW
11. County or Parish, State CHAVES COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator READ & STEVENS INCORPORATED Contact: KELLY BARAJAS E-Mail: kbarajas@read-stevens.com	
3a. Address P.O. BOX 1518 ROSWELL, NM 88202	3b. Phone No. (include area code) Ph: 575-624-3760
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T15S R27E SWSE 660FSL 1980FEL	

12. CHECK THE 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"/> Hydraulic Fracturing	<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 Hydraulic Fracture
	<input type="checkbox"/> Change Plans	<input 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 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 must 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 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

1/9/2017-2/4/2017
MIRU swab unit. SITP on vacuum. SICP 0#. Made a total of 56 swab runs. Rec 468 BW, 8 BO and Light gas blow on tbg after each swab run. See attached Hydraulic Fracturing Fluid Disclosure. Swab well and hit tight spot at 7300'. TIH w/fishing tool on sandline. Attempt to latch onto fish with no success. TOH w/sandline. TIH w/fishing tool on sandline. Catch fish. TOH w/fish. TIH w/brush, jars on sandline. Work tight spot. TOH. Brush was left in hole. Tbg 450 psi, 100 psi on csg. Release pressure. RU kill truck. Pump 20 bbls KCL dwn tbg. Release pkr and TOH w/233 jnts. Sinkerbar unscrewed from jars. Jars hanging from bottom of pkr and stopped by profile nipple. 300 psi on csg. Release pressure. Pump 10 bbls 2% KCL to kill well. TIH w/pkr. 1 jnt above pkr put on 2 3/8 L-80 seat nipple and collar. TIH w/15 stands. RU swab. Run sinker bar, jars and mandrel w/cups. No tight spots. LD swab. TIH w/233 jnts tbg. NUWH. Set pkr at 7547' top and 7553' bottom. Seating nipple at 7514'. Pressure backside to 500 psi for 10 min. Test

NM OIL CONSERVATION
ARTESIA DISTRICT
FEB 21 2017
RECEIVED

14. I hereby certify that the foregoing is true and correct. Electronic Submission #366999 verified by the BLM Well Information System For READ & STEVENS INCORPORATED, sent to the Roswell Committed to AFMSS for processing by DAVID GLASS on 02/14/2017 (17DRG0098SE)	
Name (Printed/Typed) KELLY BARAJAS	Title REPORT PREPARER
Signature (Electronic Submission)	Date 02/14/2017

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD		
Approved DAVID R. GLASS	Title	Date
Conditions of approval, if any, 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 Section 1121, 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.

(Instructions on page 2)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #366999 that would not fit on the form

32. Additional remarks, continued

okay.

Submit within 45 days of well completion

**State of New Mexico
Energy, Minerals and Natural Resources
Oil Conservation Division
1220 S. St Francis Dr.
Santa Fe, NM 87505**

Revised November 6, 2013

1 Well AP No
30-005-60782

2 Well Name
TOLES FEDERAL #001

3 Well Number
001

4 Surface Hole Location
Unit O Lot O Section 34 Township 15S Range 27E
Feet from 660 N S Line S
Feet from 1980 E W Line E

5 Bottom Hole Location
Unit O Lot O Section 34 Township 15S Range 27E
Feet from 660 N S Line S
Feet from 1980 E W Line E

6 latitude: 32.9669075 longitude: -104.2210312

7 County: Chaves

**HYDRAULIC FRACTURING FLUID
DISCLOSURE**

Original
 Amendment

8 Operator Name and Address:
READ & STEVENS INC
P. O. Box 1518
Roswell 88202

9 OGRD: 18917 10. Phone Number: 575-622-3770

11. Last Fracture Date: 1/21/2017 Frac Performed by: Elite Well Service

12. Production Type: G

13. Pool Code(s): 76079

14. Gross Fractured Interval: 7.640 ft to 8.732 ft

15. True Vertical Depth (TVD): 8.732 ft

16. Total Volume of Fluid Pumped: 82,322 gals

17. Total Volume of Re-Use Water Pumped: 0 gals

18. Percent of Re-Use Water in Fluid Pumped: %

10. HYDRAULIC FLUID COMPOSITION AND CONCENTRATION:

Trade Name	Supplier	Purpose	Ingredients	(CAS #) Chemical Abstract Service #	Maximum Ingredient Concentration in Additive (% by mass)	Maximum Ingredient Concentration in HF Fluid (% by mass)
Water	Customer	Carrier/Base Fluid	Water	7732-18-5	100%	95.51197%
Sand (Proppant)	US Silica	Proppant	Silica Substrate	14308-60-7	100%	1.11101%
RCS (Proppant)	Momentive	Proppant	Silica Substrate	14506-60-7	100%	1.12811%
Hydrochloric Acid (15%)	CNR	Acidizing	Hydrochloric Acid	7647-01-0	38.8%	0%
4-N-1 Plus	Chemplex	Iron Control Corr Inhib Surfactant	Acetic Acid	64-19-7	80%	0%
			Methanol	67-56-1	10%	0%
Plexicide 24L	Chemplex	Biocide	Tetrahydro-3,Dimethyl-2H	533-74-4	24%	0%
Plexset 730	Chemplex	Activator	Secondary Alcohol Ethoxylate	84133-50-6	50%	0%
Plexsurf 580 ME	Chemplex	Surfactant	Methyl Alcohol	67-56-1	10%	0.01913%
			2-Butoxyethanol	111-76-2	50%	0.09566%
Plexslick 953	Chemplex	Friction Reducer	Alcohol Ethoxylate Surfactants	Proprietary	8%	0%
			Hydrotreated Petroleum Distillate	64742-47-8	30%	0%
			Polyacrylamide-co-Acrylic Acid	9003-06-9	31%	0%
Plexgel 907 LE	Chemplex	Polymer	Guar Gum	9000-30-0	50%	0.2478%
			Mineral Oil	64742-47-8	55%	0.27258%
			Bentonite Clay	14508-60-7	2%	0.00991%
			Surfactant	68439-51-0	2%	0.00991%
Plexbor 101	Chemplex	Crosslinker	Ethylene Glycol	107-21-1	9.99%	0.00377%
			Potassium Metaborate	13709-94-9	30%	0.01131%
			Potassium Hydroxide	1310-58-3	5%	0.00489%
Plexgel Breaker 10L	Chemplex	Gel Breaker	Mannanase Enzymes	Proprietary	2%	0.00223%
			Sodium Chloride	7647-14-5	15%	0.0167%
Sodium Persulfate	Chemplex	Gel Breaker	Sodium Persulfate	7775-27-1	98%	0.91307%
Plexaid TDS	Chemplex	PH Control	Diaminodimethylamine	111-40-0	90%	0.06056%
Greenhib 679	Chemplex	Scale Inhibitor	Glycerine	56-81-5	35%	0%
			Proprietary	Proprietary	35%	0%
			Water	7732-18-5	30%	0%
Clayplex 650	Chemplex	Clay Stabilizer	Water	7732-18-5	60%	0.12729%
			Ethanaminum, 2-hydroxy-N,N,N-trimethyl-, chloride	67-48-1	35%	0.07425%
Plexicide 15G	Chemplex LC	Biocide	Glutaraldehyde	111-30-8	14%	0%
			Didecyl dimethyl ammonium chloride	7173-51-5	3%	0%
			Alkyl dimethyl benzyl ammonium chloride	68424-85-1	3%	0%
			Ethanol	64-17-5	3%	0%
Plexbor 108	Chemplex	Crosslinker	Hydrated Alumina/magnesium Silicate	12174-11-7	5%	0.00918%
			Glutaraldehyde	111-30-8	1%	0.00184%
			Crystalline Silica	14808-60-7	1%	0.00184%
AMA-398	Chemplex	Biocide	Dazomet	533-74-4	98%	0.01791%

20. I, as Operator, hereby certify that the information shown on this disclosure form is true and complete to the best of my knowledge and belief.

Signature: Signed Electronically Printed Name: Kelly Barajas Title: Production Analyst

Date: 1/27/2017

E-mail Address: kbarajas@read-stevens.com

NOCCD does not require the reporting of information beyond MSDS data as described in 29 CFR 1910.1200. NOCCD does not require the reporting or disclosure of proprietary, trade secret or confidential business information.