

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Artesia

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  
**Mesquite SWD Inc.**

3a. Address  
**P.O. Box 1479 Carlsbad NM 88221-1479**

3b. Phone No. (include area code)  
**575-706-1840**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**N 32.15'30.26" W 103 58'49.82"**

5. Lease Serial No.  
 6. If Indian, Allottee or Tribe Name  
 7. If Unit or CA/Agreement, Name and/or No.  
 8. Well Name and No.  
**Cypress SWD # 1**  
 9. API Well No.  
**30-015-43867**  
 10. Field and Pool, or Exploratory Area  
 11. County or Parish, State  
**Eddy NM**

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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	
	<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 recomplate 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.)

**Change of Operator / Permit Assignment**

The undersigned accepts all applicable terms, condition, stipulation and restrictions concerning operations conducted on the leased land or portion thereof, as described.

Bond coverage # NMB001255

Effective date 8/1/2016

Former Operator: R360 Permian Basin, LLC

New Operator Mesquite SWD INC.

**Accepted for record**  
**NMOCD RE**  
**4/25/17**

RECORDED

APR 25 2017

FBI

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

**Clay L Wilson**

Title **President**

Signature



Date

**08/01/2016**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by

**/s/ JD Whitlock Jr**

Title

**TLPE7**

Date

**4/10/17**

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

**CFJ**

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.