

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

NMOCD  
Artesia

FORM APPROVED  
OMB No. 1004-0137  
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.**

5. Lease Serial No.  
8910084860

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE** - Other instructions on page 2.

1. Type of Well

☐ Oil Well ☐ Gas Well ☐ Other SEE ATTACHED

2. Name of Operator  
REMNANT OIL OPERATING, LLC

3a. Address  
P.O. BOX 5375  
MIDLAND, TX 79704

3b. Phone No. (include area code)  
432-695-6997

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

8. Well Name and No.  
WEST CAP QUEEN SAND UNIT

9. API Well No.  
SEE ATTACHED

10. Field and Pool or Exploratory Area  
CAPROCK; QUEEN

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

11. Country or Parish, State  
Chaves, NM

12. CHECK THE 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 |
| <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | Change of Operator                        |
| <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 recompleting 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 recompleting 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.)

Effective 04/27/2017 Legacy Reserves Operating LP transferred operations to Remnant Oil Operating, LLC.

The undersigned accepts all applicable terms, conditions, stipulations and restrictions concerning operations on the lease land or portion thereof.

Remnant Oil Operating, LLC bond coverage pursuant to 43 CFR 3104 for lease activities is provided by BLM Bond No. NMB001311.

SEE ATTACHED

RECEIVED

SEP 27 2018

DISTRICT II-ARTESIA O.C.D.

SEE ATTACHED FOR  
CONDITIONS OF APPROVAL

Accepted For Record  
NMOCD

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

CARIE STOKER

Title REGULATORY AFFAIRS COORDINATOR

Signature

Date 05/02/2017

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

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.

(Instructions on page 2)

cc name	st	county	wellname	api	prop type	federal lse id	sec	town	rng	sec desc
WEST CAP QUEEN SAND UNIT 004 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501092	O	8910084860	17	14S	31E	H
WEST CAP QUEEN SAND UNIT 012 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501079	O	8910084860	16	14S	31E	M
WEST CAP QUEEN SAND UNIT 005 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501097	WIW	8910084860	17	14S	31E	I
WEST CAP QUEEN SAND UNIT 006 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501099	WIW	8910084860	17	14S	31E	J
WEST CAP QUEEN SAND UNIT 010 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501100	O	8910084860	17	14S	31E	O
WEST CAP QUEEN SAND UNIT 015 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501108	O	8910084860	21	14S	31E	A
WEST CAP QUEEN SAND UNIT 016 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501107	WIW	8910084860	21	14S	31E	B
WEST CAP QUEEN SAND UNIT 021 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501109	O	8910084860	21	14S	31E	G
WEST CAP QUEEN SAND UNIT 017 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501116	O	8910084860	21	14S	31E	C
WEST CAP QUEEN SAND UNIT 018 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501115	WIW	8910084860	21	14S	31E	D
WEST CAP QUEEN SAND UNIT 020 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501117	WIW	8910084860	21	14S	31E	F
WEST CAP QUEEN SAND UNIT 024 ✓	NM	CHAVES	CAPROCK; QUEEN	3000501119	WIW	8910084860	21	14S	31E	J

as well as 7, 8, 9 (ABD wells) and Pow 21 ✓  
 per conversation with Will Grey

**BUREAU OF LAND MANAGEMENT**  
**Roswell Field Office**  
**2909 West Second Street**  
**Roswell, New Mexico 88201**  
**575-627-0272**

**Change of Operator of Wells on Federal Lands**  
**Conditions of Approval**

1. Tank battery must be bermed/diked (must be able to contain 1-1/2 times the volume of the largest tank).
2. Submit for approval of water disposal method.
3. Submit updated facility diagrams as per Onshore Order #3
4. This agency shall be notified of any spill or discharge as required by NTL-3A.
5. All outstanding environmental issue must be addressed within 90 days. Contact Bob Hoskinson at (575) 627-0218 for inspection and to resolve environmental issues.
6. Install legible well sign on location with operator name, well name and number, lease number, unit number, 1/4 1/4, section, township, and range. NMOCD requires the API number on well signs.
7. Subject to like approval by NMOCD.
8. All Reporting to ONRR (OGOR Reports) must be brought current within 30 days of this approval including any past history.
9. If this well is incapable of producing in paying quantities submit NOI to plug and abandon this well or obtain approval to do otherwise within 90 days.
10. Submit plan for approval of well operations for all TA/SI wells within 30 days of this approval to change operator.
11. If not in place acquire operating rights on this lease within 30 days with the New Mexico State BLM office in Santa Fe, NM.