Form 3160-5 (September 2001)	UNITED STATES DEPARTMENT OF THE INTER		FORM APPROVED OM B No. 1004-0135 Expires: January 31, 2004
CLINE	BUREAU OF LAND MANAGEME	NM	OC DC-029392B
Do not us	e this form for proposals to drill d well. Use Form 3160-3 (APD) for	or to re-enter an Ar	te staf Indian, Allottee or Tribe Name
SUBMIT IN TRIPLICATE- Other instructions on reverse side.			7. If Unit or CA/Agreement. Name and/or No.
1. Type of Well Gas Well Other			East Shugart Unit
			8. Well Name and No. East Shugart Unit #016
2. Name of Operator K.P. Kauffman Company, Inc. 3a Address 3b Phone No. (include area code)			9. API Well No. 30-015-05688
3a. Address 3b. Phone No. (include area code)   1675 Broadway, Suite 2800, Denver, Colorado 80202 303-825-4822			10. Field and Pool, or Exploratory Area Shugart: Yates-7Rs-Queens-Grayburg
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Section 34, T. 18-S, R. 31-E, 1650' FSL, 990' FWL			
			Eddy County, NM
12 CHEC	APPROPRIATE BOX(ES) TO INDICA		
TYPE OF SUBMISSION		TYPE OF ACTION	REFORT, OR OTHER DATA
·	Acidize Deepe		Start/Resume) Water Shut-Off
Notice of Intent	Alter Casing	re Treat Reclamation	Well Integrity
Subsequent Report		Construction Recomplete	Change of Operator
Final Abandonment Noti	ce Convert to Injection Plug B		
pursuant to 43 CFR 3 BLM Bond No. NMB	000202.	K.P. Kauffman Company, Inc.	under its \$25,000.00 statewide bond coverage,
conducted on this lea	pany, Inc., as new operator, accepts all applic se, or portion of lease described. hany, Inc. agrees to fulfill the duties and assu	-	ions, and restrictions concering operation Operator under and pursuant to all the terms of
the applicable Unit A	greement, if any.	SEE AT	TACHED FOR
Accepted	For Record	CONDI	TIONS OF APPROVAL
NM	10CD 1 1 2 2018		$\sim$
14. Thereby certify that the Name (Printed/Typed	forcgoing is true and elicate II-ARTESIA C	D.C.D.	
Richard P. S	Stults	Title Chief Financial Offi	cer A
Signature fill	- Degitadiy agusd bij Rink Setalis Dis cerillaki Stadio, e. en emaderstadise kyk com. ett N Disc. 2010 ef 07 (2) 22 (2) - dol tor	Date	
	THIS SPACE FOR FEDER	AL OR STATE OFFIC	
certify that the applicant holds which would entitle the applic Title 18 U.S.C. Section 1001 and	, are attached. Approval of this notice does not we legal or equitable title to those rights in the subject ant to conduct operations thereon. 1 Title 43 U.S.C. Section 1212, make it a crime for audulent statements or representations as to anym	ct lease Office	SEP 17 2018
States any false, fictitious or fr (Instructions on page 2)	audulent statements or représentations as to anym	natter within its Jurisdiction: /	A HAA
instructions on page 2)			
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## Change of Operator 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 Jim Amos for inspection and to resolve environmental issues. 575-234-5909
- 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 BLM office in Santa Fe, NM.

**JAM 091718**