

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD-ARTESIA

FORM APPROVED
OM B No. 1004-0137
Expires: March 31, 2007

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 ☐ s Well ☒ C2. Name of Operator
Havenor Operating Co. ✓3a. Address
904 Moore Ave Roswell, NM 88201-11443b. Phone No. (include area code)
575-622-0283

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

660' FSL & 2220' FEL Sec. 31, T17S-R30E UL 0

5. Lease Serial No.

NM SWD-1182 LC-28936D

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.

Sand Hills SWD #1 ✓

9. API Well No.

30-015-29104 ✓

10. Field and Pool, or Exploratory Area

11. County or Parish, State

Eddy Co., NM

12. CHECK 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 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 Re-entry for SWD progress
	<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 recomple 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 recomple 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.)

11/28/2010 WOC

11/29 TIH drill on cmt. SD night.

11/30 Resume drlg cmt. Workstring separated. Fishing.

12/1 Replaced workstring. TIH w/bit. SD night.

12/2 DO cmt & retainer for sqzd perfs 7766-7834, re-tested sqz OK. DO cmt from sqz 8394, re-tested csg OK. SD night.

12/3 CO cmt Morrow perfs from sqz on 11/26, re-tested csg OK. CO to 12,600 SD weekend.

12/6 Drilling on cmt & CIBP 12,600

12/7 Trip to replace bit. CO to 12,856' tagged bottom cement plug. Circ to clean hole. SD night.

12/8 TOH. Perf 4 spf 12,640-668', 12,569-579, 12,459-558, 12,528-542, 12,502-520, 12,449-458 w/total of 86' and 344 shots. TIH SD night.

12/9 Acidized orig perfs 12,720-751 w/approx 5,000 gal 15% HCl when pkr unseated. Reversed acid from annulus, reset pkr 12,425, acidized all perfs (12,449 - 12,751 with remaining acid for a total of 20,000 gal. Flowed-back acid gas. Dead by 1:00 AM.

12/10 TOH layed-down workover string. SD night.

12/11 Ran 395 jts 3-1/2" PH6 IPC L-80 12.95# with 5-1/2"x 2-7/8" Nickel Arrowset 1-X packer @ 12,939' w/inert fluid in annulus.

12/13 RD workover unit. Installed injection head and nipped-up. Cleaned location. Removed trash.

12/21 Ran MIT test. Witnessed and approved by OCD. Well ready for disposal.

Accepted for record WELL READY TO
NMOCOD INJECT
RI - 1/24/11

RECEIVED

JAN 12 2011

NMOCOD ARTESIA

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

Kay Havenor

Title Geologist

Signature

Kay Havenor

Date

12/21/2010

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Office

JAN 9 2011

Date

BUREAU OF LAND MANAGEMENT

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)