	OCD-	HOBBS	HOBBS OCD			
SUNDRY Do not use ti	UNITED STATES DEPARTMENT OF THE INT BUREAU OF LAND MANAGE NOTICES AND REPOR his form for proposals to drivell. Use Form 3160-3 (APD)	MENT U TS ON WEL	REGEIVED	FORM APP OM B No 10 Expires Mar 5. Lease Serial No NM99048 6. If Indian, Allottee or 7	04-0137 ch 31, 2007	
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				7. If Unit or CA/Agreem	ent, Name and/or No	
1. Type of Well Gas Well Other 2 Name of Operator Caza Operating, LLC Other 3a Address 3b. Phone No. (include area code) 200 N. Loraine, Suite 1550, Midland, Texas 79701 3b. Phone No. (include area code) 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1980 FNL & 1980 FWL, Sec 15, T-PSS, R-34-E				 8 'Well Name and No. Mud Slide Lim 15 Federal # 1 9. API Well No. 30 025 38469 10. Field and Pool, or Exploratory Area Lea, Bone Springs 11 County or Parish, State Lea, New Mexico 		
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA						
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION					
Notice of Intent Subsequent Report Final Abandonment Notice	Acidize Deepen Production (Start/Resume) Water Shut-Off Alter Casing Fracture Treat Reclamation Well Integrity Casing Repair New Construction Recomplete Other Add Additional up Change Plans Plug and Abandon Temporarily Abandon Hole Bone Springs Convert to Injection Plug Back Water Disposal Perforations & stim					
testing has been completed Fur determined that the site is ready Caza Operating, respectfu Stage 1= Perfs_9530-36, 94 lbs 20/40 sand. Set Flow Tl Stage 2 = Perfs_9156-64, 9 Flow Through Plug @ ± 90 Stage 3 = Perfs_8954-64, 8 Composite Plug @ 8750 ft.	lly request permission to Add Bone (88-92, 9298-9302, 9262-68, 9242-47 1rough Plug @ ± 9200 ft. 139-43, 9037-53 (3 clusters) 56 .38" H	ly after all requiremet Springs Perfs and : (5 clusters) 50 .38" holes. Job = ± 2000 les. Job = 2000 gal	nts, including reclamat stage Acid/Fracture ? holes. Job= ± 2000) gals 15% HCL+30 Is 15% HCL + 3000	tion, have been completed, a e stimulate (3) stages the D gals 15% HCL+ 3000 H D00 bbls H2O+ 100,000 H bbls H2O + 100,000 lbs	nd the operator has following intervals. obls H2O+ 100,000 bs 20/40 sand. Set 20/40 sand. Set	
14. I hereby certify that the foreg Name (Printed/Typed) Rickard Wrigh Signature	-	Title Oper Date		aza Operating, LLC 21/2011	Vell to pump	TESIAI
· · · · · · · · · · · · · · · · · · ·	THIS SPACE FOR FEDE	RAL OR STA	TE OFFICE U	ISE	· · · · · · · · · · · · · · · · · · ·	
certify that the applicant holds legal which would entitle the applicant to		t warrant or bject lease Offic	SEA5 "(AD	Date 20	or so- 10	
States any false, fictitious or fraudule	13 U.S.C. Section 1212, make it a crime in the statements or representations as to any	tor any person knowi y matter within its jur	ngly and willfully to risdiction.	make to any department	igency of the United	
(Instructions on page 2)			K	E S		• •
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