

AUG 22 2012

New Mexico Oil Conservation Division, District I
1625 N. French Drive
Hobbs, NM 88240

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014

RECEIVED
LAND
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.
NMNM021097A

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1 Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

H. L. Bown Operating, L.L.C.

3a Address

P. O. Box 2237
Midland, TX 79702

3b. Phone No. (include area code)

(432) 683-5216

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

8. Well Name and No.
Federal C No.2

9 API Well No.
30-041-20910

10. Field and Pool or Exploratory Area
Bluitt Wolfcamp

4. Location of Well (Footage, Sec., T., R. M., or Survey Description)
1980' FSL & 1330' FWL Sec 4
T-8S, R-37E

11. County or Parish, State
Roosevelt County, NM

12 CHECK THE 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 checked="" 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 Request for 2 month extension for well test.
	<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 recompleat 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 recompleat 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.)

Despite diligent efforts, as detailed in its July 12, 2012 Request for Review, H.L. Brown Operating, L.L.C. ("HLB") has not been able to obtain the required third party tester and test equipment required by Notice of Written Order 12KSB20W. Accordingly, HLB requests an additional 2 months extension, until October 17, 2012, in which to continue to attempt to secure the third party tester and test equipment.

In the meantime, HLB renews its request for alternative testing, to be performed by a third party using equipment at site. As previously indicated, the well at issue does not send fluid to the Bluitt Central Facility, but produces fluid into a dedicated strapped and certified tank battery, which is measured daily. HLB will arrange to have a BLM-approved third party present for a 72 hour measuring test, to be conducted under BLM observation and supervision.

EXTENSION TO OCT 31, 2012 APPROVED
ANGEL MAYES AFM LANDS AND MINERALS

IS/ Angel Mayes

AUG 20 2012

DENIED:
TESTING UNIT MUST HAVE A NON-RESETTABLE
TOTALIZER AND TOTALIZER MUST BE SEALABLE.
THE GAS METER MUST BE CAPABLE OF
MEASURING TEMPERATURE, STATIC AND
DIFFERENTIAL.
TO MEET REQUIREMENTS OF WELL TEST.

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

Carlton Wheeler

Title Operations Manager

Signature

Carlton Wheeler

Date 08/01/2012

**ACCEPTED FOR
RECORD**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Assistant Field Manager,
Lands and Minerals
Office

AUG 20, 2012
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.

NAME IS/ Angel Mayes

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)

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