

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs
HOBBS OCD

FORM APPROVED
OMB NO. 1004-0135
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.

FEB 11 2013

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

RECEIVED

5. Lease Serial No. NMNM106715
6. If Indian, Allottee or Tribe Name
7. If Unit or CA/Agreement, Name and/or No. NMNM101361X
8. Well Name and No. ESDU 029
9. API Well No. 30-025-40870
10. Field and Pool, or Exploratory SHUGART;DELAWARE,EAST
11. County or Parish, and State LEA COUNTY, NM

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other	
2. Name of Operator SM ENERGY COMPANY	Contact: VICKIE MARTINEZ E-Mail: VMARTINEZ@SM-ENERGY.COM
3a. Address 3300 N "A" STREET BLDG 7-200 MIDLAND, TX 79705	3b. Phone No. (include area code) Ph: 432-688-1709 Fx: 432-688-1701
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 19 T18S R32E 2245FNL 460FWL	

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 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 Drilling Operations
	<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 recomplate 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 recompletion 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.)

1/1/13 SPUD WELL @ 06:00
1/2/13 TD'ED 12 1/4" HOLE; RAN 8 5/8" 24# J-55 CSG; SET @ 988 FT; 50/50 CLASS C POZM (LEAD) 12.5 PPG, 2.09 YIELD & 200 TAIL CLASS C 14.8 PPG, 1.34 YIELD & CIRC 165 SKS CMT TO SURFACE
1/4/13 TESTED BOPE 3000# & ANNULAR TO 1500#. TESTED CASING TO 1500# FOR 30 MINUTES. HELD OK.
1/9/13 TD'ED 7 7/8" HOLE; RAN 5 ?? 15.5# J-55 CSG; SET @ 5,500 FT; CMT W/600 SXS 50/50 CLASS C POZM (LEAD) 11.8 PPG & 375 SXS CLASS C (TAIL) 14.8 PPG, 1.34 YIELD & CIRC 297 SKS CMT TO SURFACE
1/10/13 RIG RELEASE

Surface 14 cement Lead ???

14. I hereby certify that the foregoing is true and correct. Electronic Submission #193047 verified by the BLM Well Information System For SM ENERGY COMPANY, sent to the Carlsbad Committed to AFMSS for processing by KURT SIMMONS on 02/06/2013 ()	
Name (Printed/Typed) VICKIE MARTINEZ	Title ENGINEER TECH II
Signature (Electronic Submission)	Date 01/31/2013

ACCEPTED FOR RECORD

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	<p>FEB 7 2013</p> <p><i>[Signature]</i></p> <p>BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE</p>
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 <i>Ko</i>	

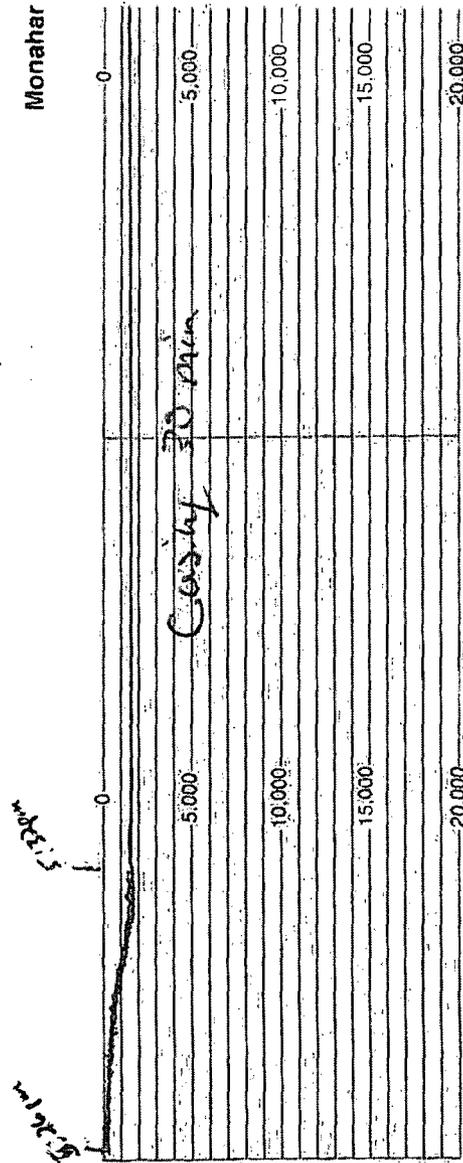
Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any person knowingly and willfully to make any statement or representation to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED **

clm

Monahar

Monaha



Graduation 1,000 lbs. PSI Per Line

Read Up
For Hydrostatic Testing
Max. 20,000 P.S.I.

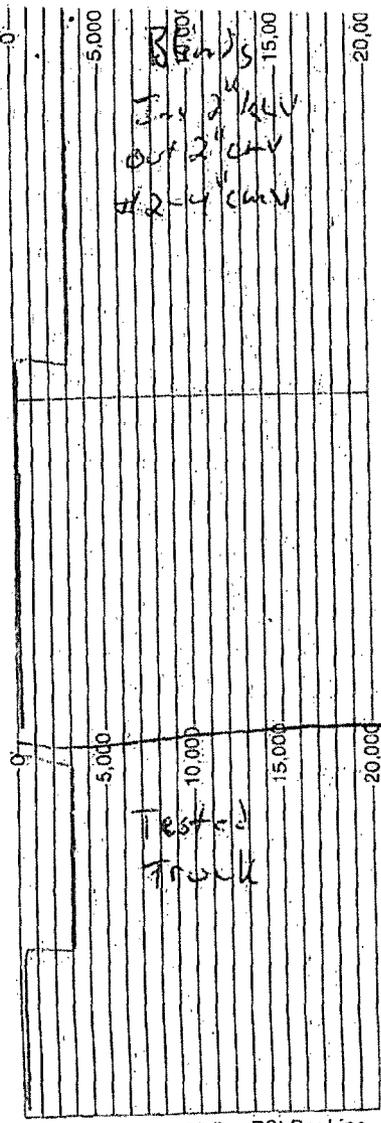
Monahans Nipple-Up Testing Service

B.O.P TESTING
Monahans Nipple-Up Testing Service
Crews - Lift Units - Tandems
Office 943-7643 • Shop 943-3618

Made in U.S.A.

Starting Time 5:26 Chart No. 3
 Service Co. Chapstick 124
 Company SRL Energy
 State NM Date _____
 Lease ESDJ #29 Well No. _____
 Pipe Size _____ Wt. _____
 Well Head Type & Size 11" 3000
 Type Plug _____
 Operator Brian Gaddes
 Unit No. 218
 Test Casing

Monat



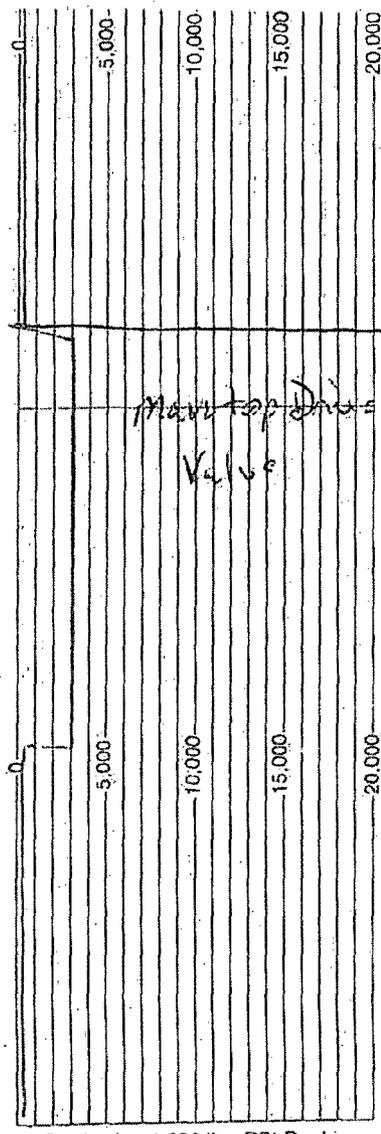
Mor

Graduation 1,000 lbs. PSI Per Line
Read Up
 For Hydrostatic Testing
 Max. 20,000 P.S.I.

B.O.P TESTING
Monahans Nipple-Up Testing Service
 Crews - Lift Units - Tandems
 Office 943-7643 • Shop 943-3618
 Made in U.S.A.

Starting Time _____ Chart No. _____
 Service Co. Exstar 124
 Company SM Eng'g
 State NM Date _____
 Lease ESD 29 Well No. _____
 Pipe Size 4 1/2 x 4 Wt. _____
 Well Head Type & Size 11 3000
 Type Plug 11 C 22
 Operator Brian G. Davis
 Unit No. 218
 Test _____

Monat



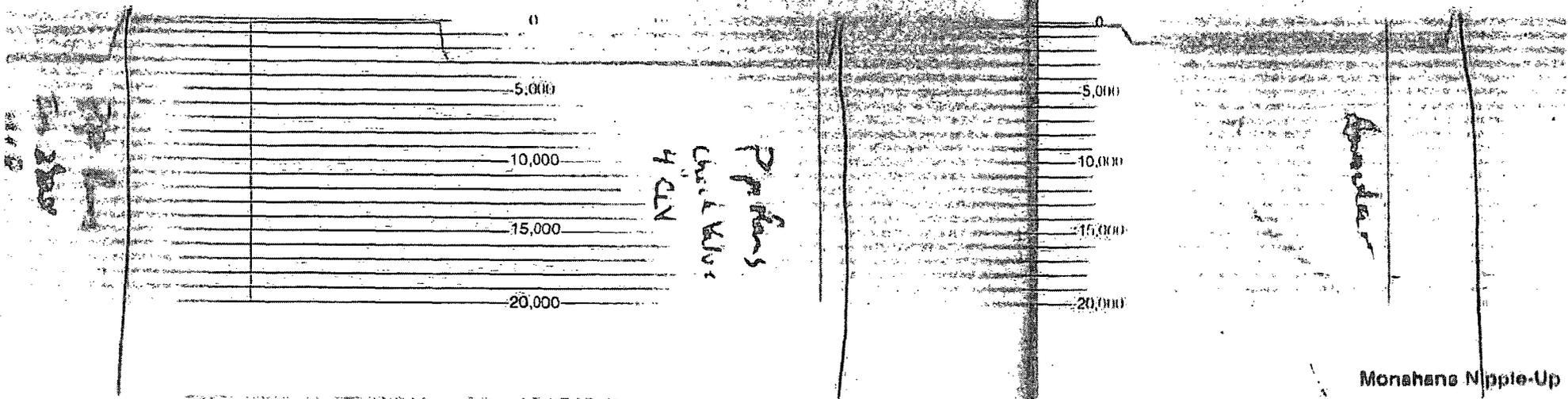
Mor

Graduation 1,000 lbs. PSI Per Line
Read Up
 For Hydrostatic Testing
 Max. 20,000 P.S.I.

B.O.P TESTING
Monahans Nipple-Up Testing Service
 Crews - Lift Units - Tandems
 Office 943-7643 • Shop 943-3618
 Made in U.S.A.

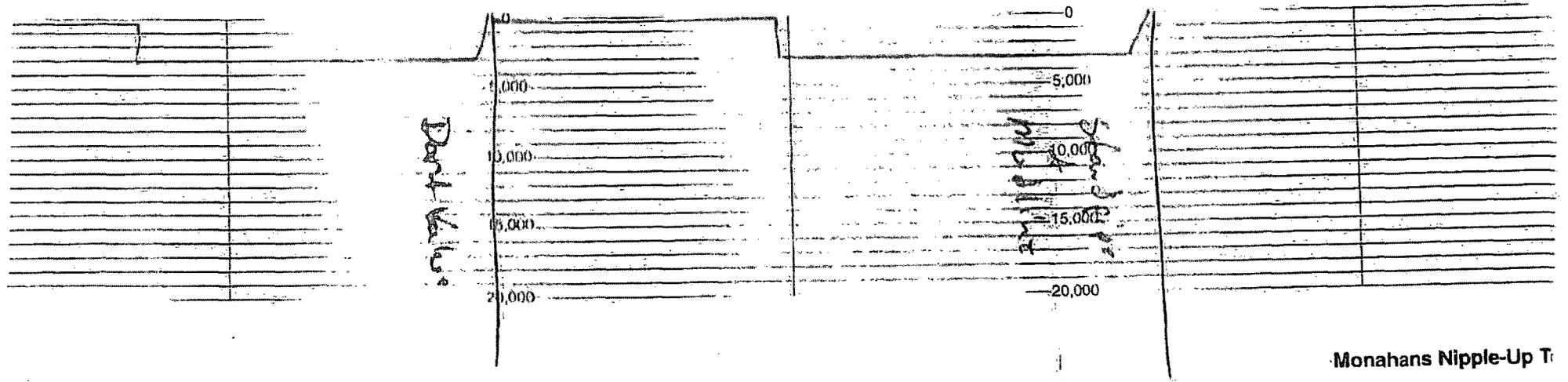
Starting Time _____ Chart No. 2
 Service Co. Exstar 124
 Company SM Eng'g
 State NM Date _____
 Lease ESD 29 Well No. _____
 Pipe Size 4 1/2 Wt. _____
 Well Head Type & Size _____
 Type Plug _____
 Operator Brian G. Davis
 Unit No. 218
 Test Flow Valve
standpipe & mandrels

Monahans Nipple-Up 1



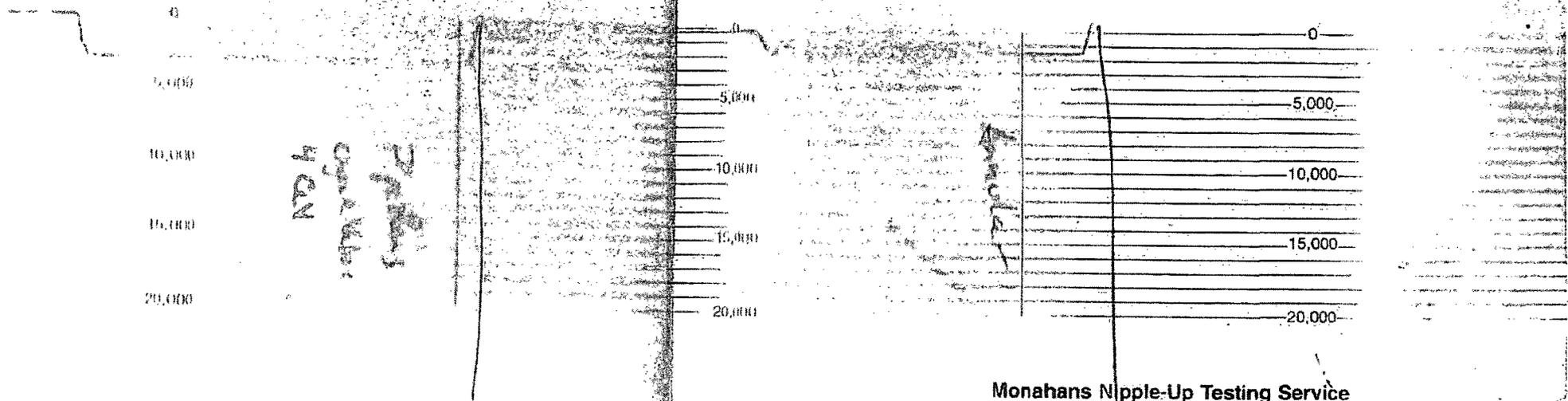
Monahans Nipple-Up

Monahans Nipple-Up Tes



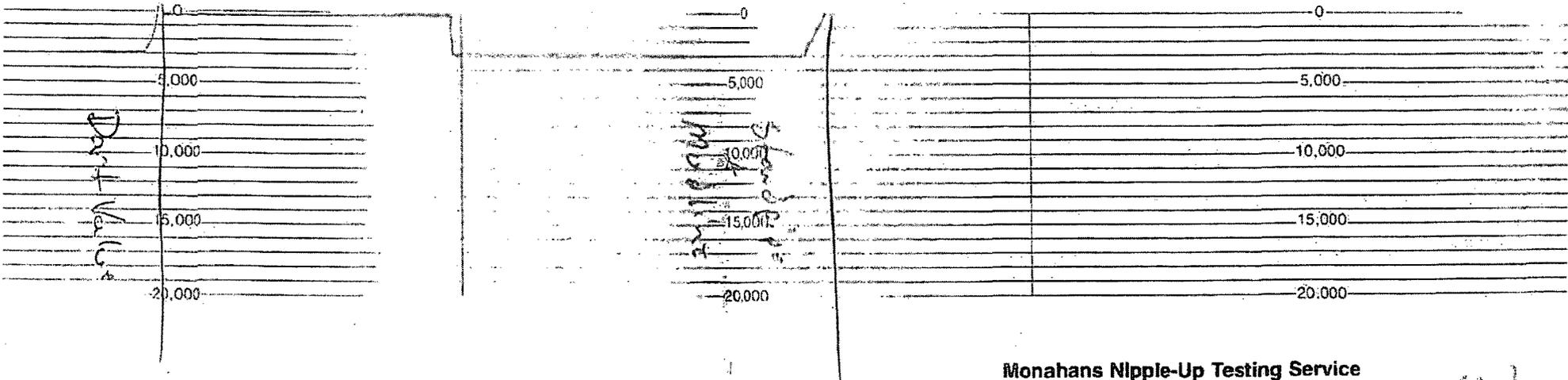
Monahans Nipple-Up Tr

Monahans Nipple-Up Testing Service



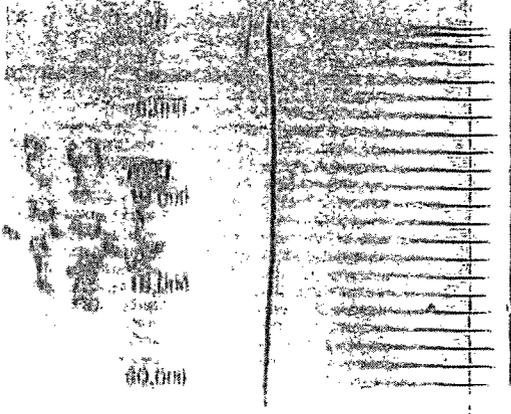
Monahans Nipple-Up Testing Service

Monahans Nipple-Up Testing Service

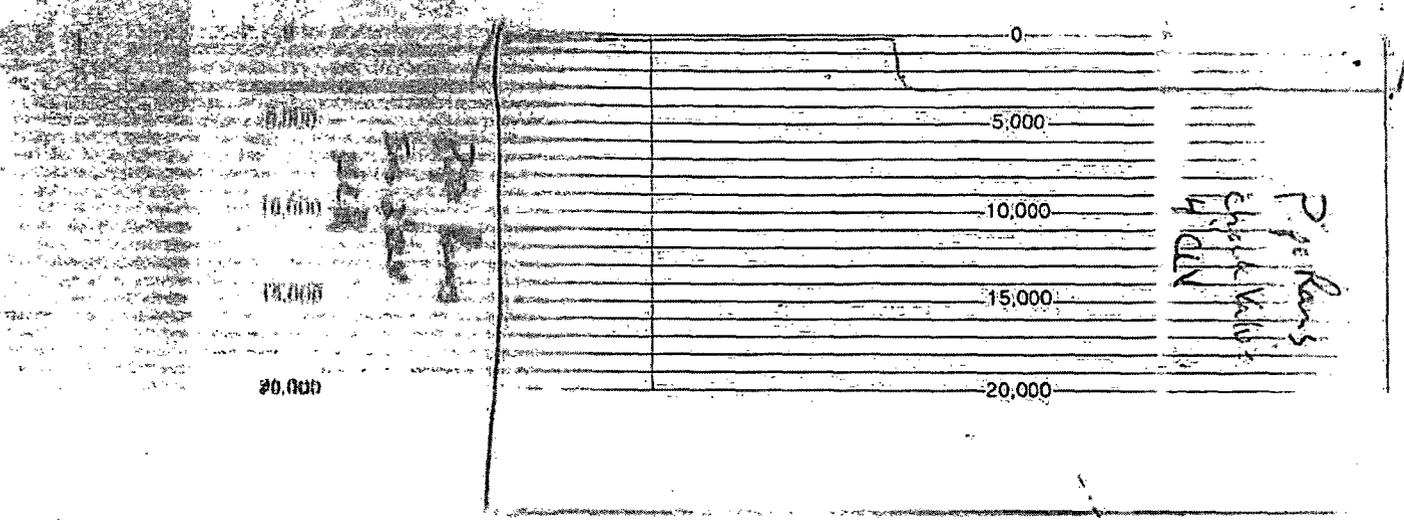


Monahans Nipple-Up Testing Service

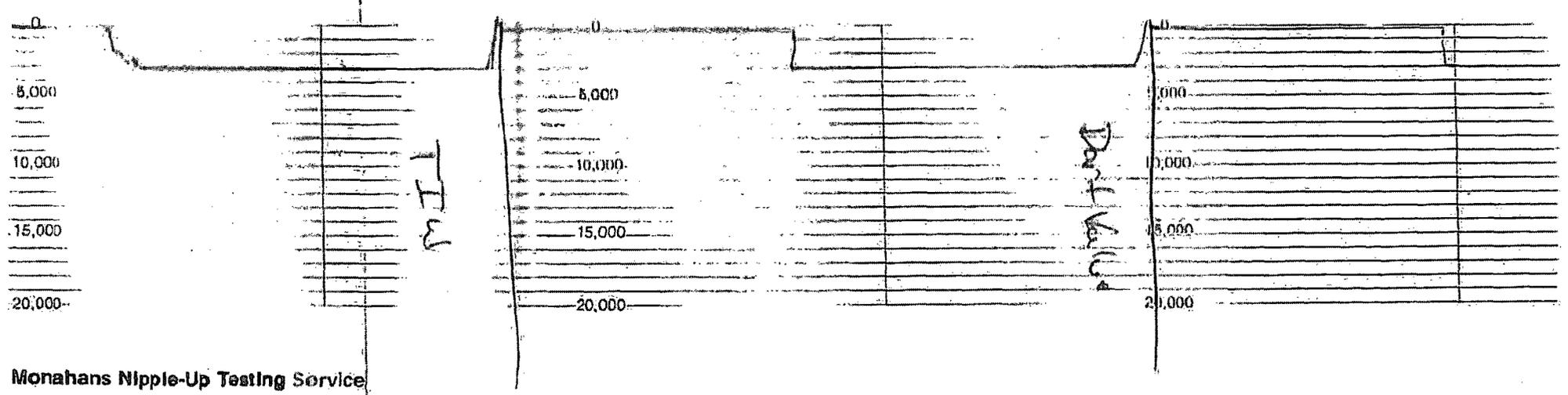
Monahans Nipple-Up Testing Service



Monahans Nipple-Up Testing Service



Monahans Nipple-Up Testing Service



Monahans Nipple-Up Testing Service