

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

HOBBSOCD
DEC 12 2014
RECEIVED

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.

5. Lease Serial No. NM-0559539
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other SWD

2. Name of Operator: Harvard Petroleum Company, LLC

3a. Address: PO Box 936, Roswell, NM 88202
 3b. Phone No. (include area code): 575-623-1581

4. Location of Well (Footage, Sec., T., R., M., or Survey Description): Unit O, 810' FSL & 1830' FEL, Sec 29-T23S-R32E NMPM

7. If Unit of CA/Agreement, Name and/or No.
 8. Well Name and No. James Federal #1
 9. API Well No. 30-025-31515
 10. Field and Pool or Exploratory Area: W. Triste Draw, Delaware
 11. Country or Parish, State: Lea Co., 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
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Replace injection tbg w/
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	3 1/2" plastic coated tbg

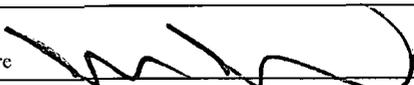
13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths 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 recompletion 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.)

12/1/14 - Pumper noticed pressure on 5 1/2" casing indicating probable hole in injection tubing string. SD injection, call for PU, RD wellhead, hook up vac truck on csg to pull and transfer water back to stock tanks, RU PU, NU BOP, release pkr, TOH to find hole in tbg.

12/2/14 - Finish TOH laying down tbg and pkr, PU RIH w 5 1/2" x 2 7/8" nickel coated pkr and on/off tool w 2.31" profile nipple and 150 jts + 8' & 10' subs new 3 1/2" J55 plastic coated tubing.

12/3/14 - RU kill truck, circ pkr fluid, set pkr at 4769' and test packer to 580 psi for 32 minutes w Basic kill truck and chart, George Bower w NMOCD witnessed test - signed chart attached). RD kill truck and PU, NU wellhead, resume injection at 4 pm.

OCD Conditions of Approval
Accepted for **RECORD ONLY**. All Federal forms require **BLM APPROVAL**.

14. I hereby certify that the foregoing is true and correct.
 Name (Printed/Typed): Jeff Harvard
 Title: Manager
 Signature: 
 Date: 12/11/2014

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

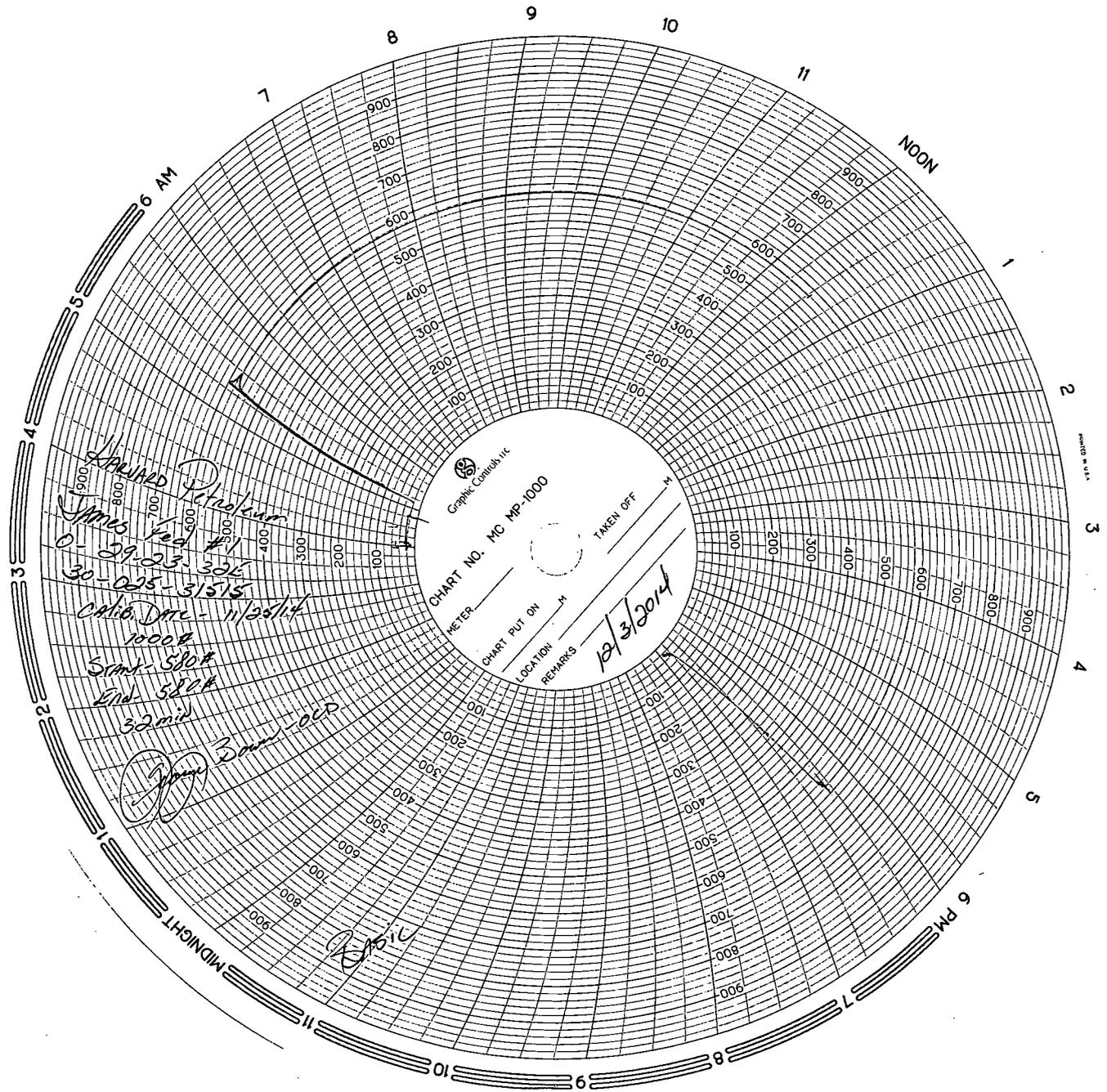
Approved by: _____ Title: _____ Date: _____
 Office: _____

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)

MKB/ocd 12/15/2014 **Accepted for Record Only**

DEC 17 2014 



A handwritten mark resembling a stylized 'L' or a checkmark, located at the bottom left of the page.