

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB No. 1004-0137
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.5. Lease Serial No.
NMLC063586

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other2. Name of Operator
SHACKELFORD OIL COMPANY3a. Address
203 W WALL ST, STE 200, MIDLAND, TX 797013b. Phone No. (include area code)
(432) 682-9784

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

8. Well Name and No.
SOUTHERN CALIFORNIA FEDERAL # 9129. API Well No.
30-025-334614. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SEC 29 T19S R32E 1980' FSL & 660' FWL10. Field and Pool or Exploratory Area
LUSK DELAWARE, WEST11. Country or Parish, State
LEA 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 CHANGE OF NAME
	<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 recompletable 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 recompletable 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.)

DUE TO RECOMPLETION TO THE LOWER BRUSHY CANYON DELAWARE FORMATION, THE WELL IS NO LONGER IN THE LUSK WEST DELAWARE UNIT. THEREFORE, THE NAME HAS BEEN CHANGED FROM THE LUSK WEST DELAWARE UNIT # 912 TO THE SOUTHERN CALIFORNIA FEDERAL #912

WELL PRIOR TO RECOMPLETION

NAME	API	LEASE
LUSK WEST DELAWARE UNIT #912	30-025-33461	NMLC063586

WELL AFTER RECOMPLETION

NAME	API	LEASE
SOUTHERN CALIFORNIA FEDERAL #912	30-025-33461	NMLC063586

14. I hereby certify that the foregoing is true and correct.

Name (Printed/Typed)
BRADY SHACKELFORD

Title CFO

Signature

Date 09/04/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Office

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 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)



OCT 22 2015