

OCT 26 2012

RECEIVED

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM 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.

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

Oil Well  Gas Well  Other AMMENDED

2. Name of Operator  
Endeavor Energy Resources, LP

3a. Address  
110 N. Marienfeld Street, Suite 200  
Midland, Texas 79701

3b. Phone No. (include area code)  
(432) 687-1575

4. Location of Well (Footage, Sec., T.R.,M., or Survey Description)  
660 FNL, 660 FWL, SEC. 3, T26S, R33E, Lea CO. NM.

5. Lease Serial No.  
NM-119278

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
Red Bull "3" Federal 1

9. API Well No.  
30-025-39812

10. Field and Pool or Exploratory Area  
from Red Hills/Wolfcamp Gas to Red Hills Bone Spring

11. Country or Parish, State  
Lea, 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 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 Application For
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Commingling Down
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	Hole

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.)

Application for commingling Red Hills Wolfcamp Gas with Red Hills Bone Spring.

Notice of application has been sent to all affected mineral and working interest owners for their review. Please advise if more data is needed or other procedures need to be implemented.

Pool Name	Red Hills, Bone Spring	Red Hills Wolfcamp (Gas)
Pool Code	51020	
Top and Bottom Pay	9200' - 12,254'	12,357 - 13,560'
Method of Production	Pumping Unit	Pumping Unit
Producing, Shut - In	Producing	Shut in
Date of Last Production	8/29/2012	6/12/2012
Rate of Last Production	35 oil, 54 gas, 91 water	32 oli, 62 gas, 64 water
Fixed Allocation Percentage	52% oil, 47% gas	48% oil, 53% gas
Bottom Hole Pressure	5,005 PSI	5,420 PSI

SUBJECT TO LIKE APPROVAL BY STATE

Both intervals shown above require a pumping unit to produce. Their pressures, oil analysis and gas analysis are similar. The Bone Springs will be tested on an annual basis by removing down hole production equipment, setting a RBP between the two zones, determimne the contribution of each zone and report the results to the BLM. See attached analysis.

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

Title Regulatory Analyst

Signature

Date 10/02/2012

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

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.

Office

APPROVED  
OCT 24 2012  
WESLEY W. INGRAM  
PETROLEUM ENGINEER

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)

Accepted for Record Only

JMB/OCD 3/28/2016

MAR 29 2016

Wolfcamp



*Mobile Analytical Laboratories, Inc.*

LABORATORIES IN ODESSA, GIDDINGS & STACY DAM  
Billing Address: P.O. BOX 69210 • ODESSA, TEXAS 79769-0210  
Shipping Address: 2800 WESTOVER STREET • ODESSA, TEXAS 79764  
PHONE (432) 337-4744  
FAX (432) 337-8781

MS. JUDY FUENTES  
WELL TESTING INC.  
P.O. BOX 1263  
MONAHANS, TEXAS 79756

FEBRUARY 15, 2011

DEAR MS. FUENTES:

THE FOLLOWING IS THE DISTILLATION RESULT FROM THE ENDEAVOR RED BULL 3 FED #1 SAMPLE, RECEIVED 02/14/11, LAB NO. 7830:

**DISTILLATION RESULTS**

<u>PERCENT OVER FIRST DROP</u>	<u>TEMPERATURE, DEG/F</u>
5%	115
10%	175
20%	205
30%	254
40%	298
50%	375
60%	450
70%	526
80%	614
90%	701
END POINT	756
	760

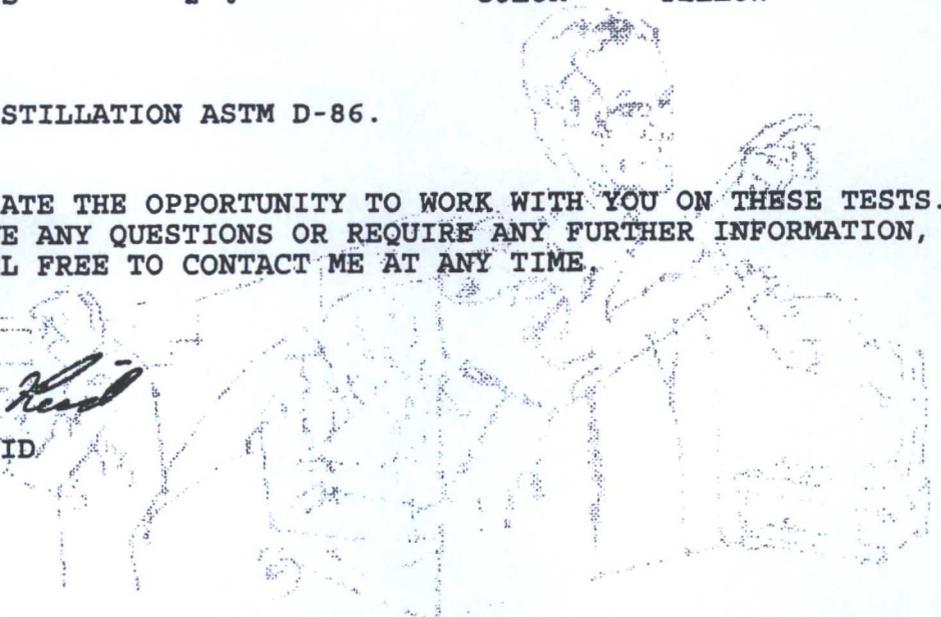
RECOVERY	96 %	API GRAVITY	47.9	@ 60°F
RESIDUE	2 %	SPECIFIC GR.	0.7888	@ 60°F
LOSS	2 %	COLOR	YELLOW	

METHOD: DISTILLATION ASTM D-86.

WE APPRECIATE THE OPPORTUNITY TO WORK WITH YOU ON THESE TESTS. IF YOU HAVE ANY QUESTIONS OR REQUIRE ANY FURTHER INFORMATION, PLEASE FEEL FREE TO CONTACT ME AT ANY TIME.

SINCERELY,

STEPHEN REID  
SR/md



**MOBILE ANALYTICAL LABORATORIES, INC.**

P.O. BOX 69210  
 ODESSA, TEXAS 79769  
 PHONE (432) 337-4744

9848

ANALYSIS REPORT

COMPANY . . . WELL TESTING	STATION . . . . .
LEASE/PLANT RED BULL 3 FED #1	PRESS. PSIG . . . .
OPERATOR . ENDEAVOR	TEMP. DEG. F . . . .
CYLINDER . 32	SAMPLED / RECEIVED 02/14/11
H2S PPM . . NOT TESTED	SAMPLED BY . . . . MW

FRACTIONAL ANALYSIS

COMPONENT	MOL %	GPM C2+	GPM C5+
NITROGEN . . . . .	0.932	0.000	0.000
CARBON DIOXIDE . . .	0.255	0.000	0.000
METHANE . . . . .	76.622	0.000	0.000
ETHANE . . . . .	12.379	3.305	0.000
PROPANE . . . . .	5.614	1.544	0.000
ISO-BUTANE . . . . .	0.721	0.236	0.000
N-BUTANE . . . . .	1.598	0.503	0.000
ISO-PENTANE . . . . .	0.384	0.140	0.140
N-PENTANE . . . . .	0.432	0.156	0.156
HEXANES PLUS . . . .	1.063	0.463	0.463
TOTALS	100.000	6.347	0.759

CALC. SP.GRAVITY 0.755

BTU/CU. FT. (14.650 PSIA, 60 DEG. F)

CALC. GROSS WET 1276

CALC. GROSS DRY 1298

DISTRIBUTION:  
 MS. JUDY FUENTES

NOTES:

REPORT DATE: 02/14/11



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PHONE (432) 337-4744

FAX (432) 337-8781

MR. KELVIN FISHER  
ENDEAVOR ENERGY RESOURCES  
110 N. MARIENFELD, STE 200  
MIDLAND, TEXAS 79701

AUGUST 02, 2012

DEAR MR. FISHER:

THE FOLLOWING IS THE DISTILLATION RESULT FROM THE RED BULL 3  
FED #1 SAMPLE, RECEIVED 08/01/12, LAB NO. 12622:

### DISTILLATION RESULTS

<u>PERCENT OVER</u>		<u>TEMPERATURE, DEG/F</u>
FIRST DROP		113
5%		176
10%		205
20%		259
30%		310
40%		400
50%		484
60%		565
70%		654
80%		708
90%		740
END POINT		740
RECOVERY	96 %	API GRAVITY 44.0 @ 60°F
RESIDUE	2 %	SPECIFIC GR. 0.8065 @ 60°F
LOSS	2 %	COLOR YELLOW

METHOD: DISTILLATION ASTM D-86.

WE APPRECIATE THE OPPORTUNITY TO WORK WITH YOU ON THESE TESTS.  
IF YOU HAVE ANY QUESTIONS OR REQUIRE ANY FURTHER INFORMATION,  
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