

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCD Hobbs

FORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018

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.
NMNM77090

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2 **MAY 08 2018**

7. If Unit or CA/Agreement, Name and/or No.
NMNM137411

1. Type of Well
 Oil Well Gas Well Other

RECEIVED

8. Well Name and No.
ROMEO FEDERAL COM 1H

2. Name of Operator
CENTENNIAL RESOURCE PRODUCTION
Contact: MELISSA LUKE
Email: MELISSA.LUKE@CDEVINC.COM

9. API Well No.
30-025-42999

3a. Address
1001 17TH STREET SUITE 1800
DENVER, CO 80202

3b. Phone No. (include area code)
Ph: 720-499-1482

10. Field and Pool or Exploratory Area
RED HILLS BONE SPRING, N.

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 22 T24S R34E Mer NMP NWNW 400FNL 660FWL

11. County or Parish, State
LEA COUNTY COUNTY, NM

12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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"/> Hydraulic Fracturing	<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 type="checkbox"/> Other
	<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 checked="" 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 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.

Centennial plans to dispose of produced water in the Madera SWD #1 (30-025-42448), operated by OWL SWD Operating, LLC. It is located at 433' FSL, 1970' FEL, Section 14, T24S, R31E, Lea County, NM. The NMOCD approve administrative order number for this well is SWD-1550.

Included with this sundry is the Onshore Order #7 Water Disposal Questionnaire.

Should you have any questions or concerns please feel free to contact me at 720-499-1482 or at melissa.luke@cdevinc.com.



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

Electronic Submission #411348 verified by the BLM Well Information System
For CENTENNIAL RESOURCE PRODUCTION, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH MCKINNEY on 04/19/2018 ()

Name (Printed/Typed) MELISSA LUKE

Title SR. REGULATORY ANALYST

Signature (Electronic Submission)

Date 04/12/2018

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 _____

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)

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

KS

WATER DISPOSAL ONSHORE ORDER #7

The following information is needed before your method of water disposal can be considered for approval.

1. Name(s) of formation (s) producing water on the lease.
__2nd bone spring (currently) with plans for Wolfcamp A_____

2. Amount of water produced from each formation in barrels per day.
__2nd bone spring currently = 650 bwpd, In future peak rate 12,000 bwpd from wolfcamp A_____

3. How water is stored on the lease.
__in tanks on location_____

4. How water is moved to disposal facility.
__transfer pump and poly line to Madera_____

5. Operator's of disposal facility __OWL SWD Operating, LLC_____
 - a. Lease name or well name and number __Madera SWD #1_____

 - b. Location by $\frac{1}{4}$ $\frac{1}{4}$ Section, Township, and Range of the disposal system _____

__433' FSL, 1970' FEL, Section 14, T24S, R31E, Lea County, NM_____

 - c. The appropriate NMOCD permit number __NMOCD approved administrative order number SWD-1550_____