

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Carlsbad Field Office
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.
NM15035

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

HOBBS OCD

7. If Unit or CA/Agreement, Name and/or No.
SRM1542

8. Well Name and No.
SUPRON 14 FEDERAL COM 1

9. API Well No.
30-025-26719-00-A1

10. Field and Pool or Exploratory Area
ANTELOPE RIDGE-BONE SPRING, W

11. County or Parish, State
LEA COUNTY, NM

1. Type of Well

Oil Well Gas Well Other **(370351)**

SEP 26 2018

2. Name of Operator
WYNNCROSBY OPERATING LP

Contact: JOSE VELEZ
E-Mail: jose.velez@wynncrosby.com

RECEIVED

3a. Address
14241 DALLAS PARKWAY
DALLAS, TX 75254

3b. Phone No. (include area code)
Ph: 972-380-5500

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 14 T23S R34E NESW 1980FSL 1980FWL

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 checked="" 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 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.

This is a notification of our intent to re-complete the subject well in Bone Springs at a depth of 10,180' - 10,208'. Procedure as follows:

1. Locate and test anchors
2. MIRU workover unit. Blow down well and kill if needed with produced salt water.
3. ND well head and NU 5K dual string BOP.
4. Latch onto short string and pull out of dual packer at 11,200'. POOH standing back 2 7/8" 6.5# N-80 tubing and lay down seal bore assembly.
5. ND dual string BOP and NU 10k BOP.
6. Latch onto long string and release Otis RDH packer and sting out of Otis WD packer at 12,900'.
7. POOH laying down 2 7/8" 6.5# long string.
8. MIRU wire line company. PU and RIH with 6.5" GR and junk basket to 12,900'. POOH.
9. PU and RIH with 7 5/8" 39# CIBP and set at 12,000'. POOH with setting tool and PU dump bailer.

WELL DIAGRAM NEEDED

Submit C-102 to NM OCD

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

Electronic Submission #431840 verified by the BLM Well Information System
For WYNNCROSBY OPERATING LP, sent to the Hobbs
Committed to AFMSS for processing by PRISCILLA PEREZ on 08/20/2018 (18PP1717SE)

Name (Printed/Typed) JOSE VELEZ

Title CONTRACT CONSULTANT

Signature (Electronic Submission)

Date 08/20/2018

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Returned

Title

SEP 21 2018

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

/s/ Jonathon Shepard

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)

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #431840 that would not fit on the form

32. Additional remarks, continued

Dump 10' of cement on CIBP.

10. PU and RIH with 7 5/8" 39# CIBP and set at 12,890'. POOH with setting tool and PU dump bailer.

Dump 10' of cement on CIBP.

11. PU 8.379" GR and junk basket and RIH to top of liner at 11,500'. POOH laying down GR and junk basket.

12. PU 9 5/8" x 2 7/8" packer and RIH to 11,500'. Pressure test casing below packer to 5,000 psi.

If casing test, release packer and PU to 8,000'. Set packer and test casing below packer to 5,000

psi. If casing test, release packer and POOH.

13. RU wireline and run CBL from 11,000' to 9,000'. Report findings before proceeding.

14. PU and RIH with casing gun and perforate the 2nd Bone Spring Sand from 10,180'-10,208' using SDP charges, 3 SPF 120 degree phasing. Monitor casing pressure for any changes. POOH with gun and RD perforators.

15. PU and RIH with wireline entry guide, 8' sub, SN 9 5/8"x2 7/8" packer on 2 7/8" 6.5" tubing.

Set packer at +/-10,150'. Land on full joint do not use subs.

16. Swab well if needed to kick off and evaluate for stimulation

17. Test well