

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.
NMNM137469
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

SEP 23 2019

RECEIVED

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit or CA/Agreement, Name and/or No. NMNM139207	
2. Name of Operator AMEREDEV OPERATING LLC		8. Well Name and No. NANDINA FED COM 25 36 31 125H	
3a. Address 5707 SOUTHWEST PARKWAY BLDG 1 STE 275 AUSTIN, TX 78735		9. API Well No. 30-025-45244-00-X1	
3b. Phone No. (include area code) Ph: 7373004723		10. Field and Pool or Exploratory Area UNKNOWN WOLFCAMP	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 31 T25S R36E SESE 200FSL 2270FEL 32.080128 N Lat, 103.303001 W Lon		11. County 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"/> 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 checked="" type="checkbox"/> Other Drilling Operations
	<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 recomplate 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 recomplate 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.

12/3/2018 - Spud Well 06:00 hrs

12/4/2018 - Run 29 jts 13.375" 54.5# J-55 BTC surface casing. Run 11 centralizers, 2 on shoe track & 1 every 4th joint to surface. Casing set at 1,200' full returns for entire job.

12/4/2018 - Pressure test lines to 2500 psi. Pump 20 bbl dyed gel spacer. Pump 250 bbis (820 sks) lead cement Class "C" w/ 2% gel + 3lb/sk kol-seal +.125 lb/sk Cellophane + .4% defoamer @ 13.5 ppg yield 1.71 cuft/sk. Pump 48 bbis (200 sks) tail cement Class "C" + 2% Calcium Chloride @ 14.8 ppg Yield 1.34 cuft/sk. Drop plug and displace with 173 bbis freshwater. Bump plug @ 433 psi and pressure up to 1007 psi. Bled back 1 bbl. 100% returns throughout job. Circulate 140 bbis (459 sks) cement to surface. WOC 4Hrs. Test 13.375" J55 BTC to 1500 psi. Test OK.

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #475798 verified by the BLM Well Information System
For AMEREDEV OPERATING LLC, sent to the Hobbs
Committed to AFMSS for processing by DEBORAH HAM on 07/30/2019 (19DMH0176SE)

Name (Printed/Typed) ZACHARY BOYD	Title OPERATIONS SUPERINTENDENT
Signature (Electronic Submission)	Date 07/30/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title Accepted for Record	Date SEP 12 2019
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 Jonathon Shepard Carlsbad Field 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)

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

Ken

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Attachment

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

SUNDRY NOTICES AND REPORTS ON WELLS
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5. Lease Serial No.
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7. If Unit of CA/Agreement, Name and/or No.

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.
NANDINA FED COM 25 36 31 125H

2. Name of Operator
AMEREDEV OPERATING LLC

9. API Well No.
30-025-45244

3a. Address
5707 Southwest Parkway, Building 1, Suite 275 Austin, TX 78735

3b. Phone No. (include area code)
(737)300-4700

10. Field and Pool or Exploratory Area
WC-025 G-09 S263620C / WOLFCAMP

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Surface: Lot O / 200 FSL / 2270 FEL / LAT 32.0801266 / LONG -103.3030035
At Proposed prod. zone: NWNW / 200 FNL / 2318 FEL / LAT 32.1080685 / LONG -103.3031685

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				
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<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 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		

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

Zachary Boyd

Title Operations Superintendent

Signature

Date 02/14/2019

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

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(Instructions on page 2)