

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.  
NMNM107396

6. If Indian, Allottee or Tribe Name

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

8. Well Name and No.  
WAPITI 31 FEDERAL 02

9. API Well No.  
30-025-37643-00-S1

10. Field and Pool or Exploratory Area  
EK-YATES-7RVRS-QUEEN

11. County or Parish, State  
LEA COUNTY, NM

**SUBMIT IN TRIPLICATE - Other instructions on page**

1. Type of Well  
 Oil Well  Gas Well  Other

2. Name of Operator  
CHISHOLM ENERGY OPERATING LLC  
Contact: JENNIFER ELROD  
Email: jelrod@chisholmenergy.com

3a. Address  
801 CHERRY STREET SUITE 1200 UNIT 20  
FORT WORTH, TX 76102

3b. Phone No. (include area code)  
Ph: 817-953-3728

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
Sec 31 T18S R34E SWSE 330FSL 1830FEL

**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 checked="" 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 checked="" 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.

08/05/2019-Pulled Rods  
08/06/2019-Pulled Tubing  
08/07/2019-Set ClBP @ 9050'; Dump Bail 35' of Cmmt w/TOC @ 9015'MD.

24 NOTIFICATION GIVEN TO BLM PRIOR TO PERFORMING MIT TEST  
11/08/2019-Perform MIT, Gary Robinson OCD-Hobbs on location to witness test. Start @ 620 psi, End @ 600 psi, 32 min; good test. TA Complete.

**TA Status Approved thru 7/24/2020**

14. I hereby certify that the foregoing is true and correct.  
Electronic Submission #492302 verified by the BLM Well Information System  
For CHISHOLM ENERGY OPERATING LLC, sent to the Hobbs  
Committed to AFMSS for processing by PRISCILLA PEREZ on 11/15/2019 (19PP2568SE)

Name (Printed/Typed) JENNIFER ELROD Title SR. REGULATORY ANALYST

Signature (Electronic Submission) Date 11/13/2019

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By /s/ Jonathon Shepard Title PE Date NOV 19 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 CFO

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**

*XZ NMOC 12-20-19*

**FOR RECORD ONLY**

District 1  
 1625 N French Dr., Hobbs, NM 88246  
 Phone: (575) 393-6161 Fax: (575) 393-6720

State of New Mexico  
 Energy, Minerals and Natural Resources Department  
 Oil Conservation Division Hobbs District Office

**BRADENHEAD TEST REPORT**

|   |  |                                   |
|---|--|-----------------------------------|
| Operator Name<br><i>Chisholm Energy</i> |  | API Number<br><i>30-025-37643</i> |
| Property Name<br><i>WAPITI 31 Fed.</i>  |  | Well No.<br><i>#2</i>             |

**1. Surface Location**

| UL - Lot | Section   | Township   | Range      | Feet from  | N/S Line | Feet From   | E/W Line | County     |
|----------|-----------|------------|------------|------------|----------|-------------|----------|------------|
| <i>0</i> | <i>21</i> | <i>18S</i> | <i>34E</i> | <i>330</i> | <i>S</i> | <i>1830</i> | <i>E</i> | <i>LEA</i> |

**Well Status**

|   |           |    |   |         |    |     |          |     |   |          |     |                        |
|---|-----------|----|---|---------|----|-----|----------|-----|---|----------|-----|------------------------|
| <input checked="" type="checkbox"/> YES | TA'D WELL | NO | <input checked="" type="checkbox"/> YES | SHUT-IN | NO | INJ | INJECTOR | SWD | <input checked="" type="checkbox"/> OIL | PRODUCER | GAS | DATE<br><i>11-8-19</i> |
|---|-----------|----|---|---------|----|-----|----------|-----|---|----------|-----|------------------------|

**OBSERVED DATA**

|                             | (A)Surface | (B)Interm(1) | (C)Interm(2) | (D)Prod Csg | (E)Tubing     |
|-----------------------------|------------|--------------|--------------|-------------|---------------|
| Pressure                    | <i>0</i>   | /            | /            | <i>0</i>    | <i>NONE</i>   |
| <b>Flow Characteristics</b> |            |              |              |             |               |
| Puff                        | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | CO2           |
| Steady Flow                 | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | WTR           |
| Surges                      | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | GAS           |
| Down to nothing             | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | Type of Fluid |
| Gas or Oil                  | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | Indicated for |
| Water                       | <i>Y/N</i> | <i>Y/N</i>   | <i>Y/N</i>   | <i>Y/N</i>  | Waterhead if  |
|                             |            |              |              |             | applies       |

Remarks - Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

*T/A TEST*

|                 |                      |                           |
|-----------------|----------------------|---------------------------|
| Signature:      |                      | OIL CONSERVATION DIVISION |
| Printed name:   |                      | Entered into RBDMS        |
| Title:          |                      | Re-test <i>XZ</i>         |
| E-mail Address: |                      |                           |
| Date:           | Phone:               |                           |
| Witness:        | <i>Gary Robinson</i> |                           |

INSTRUCTIONS ON BACK OF THIS FORM





### Wapiti 31 Federal 2

API # 30-025-37643

TEMPORARILY ABANDONED WBD

11/08/2019

