

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

HOBBS OCD
APR 22 2020
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SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMLC060967
2. Name of Operator CROSS TIMBERS ENERGY LLC		6. If Indian, Allottee or Tribe Name
Contact: SAMANTHA AVARELLO E-Mail: savarello@mspartners.com		7. If Unit or CA/Agreement, Name and/or No. 8910088140
3a. Address 700 W 7TH STREET FORT WORTH, TX 76102	3b. Phone No. (include area code) Ph: 817-334-7747	8. Well Name and No. SEMGSAU 105
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 30 T17S R33E NWSE Tract 1 2490FSL 1595FEL		9. API Well No. 30-025-26512-00-S1
		10. Field and Pool or Exploratory Area MALJAMAR
		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 checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Hydraulic Fracturing
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input checked="" type="checkbox"/> Other Workover Operations
	<input type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Convert to Injection

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.

Cross Timbers Energy LLC has completed workover operations as of 3/12/2020. Attached are the procedure, passing MIT, and Bradenhead Test. MIT Start: 580 psi, End: 575 psi.

14. I hereby certify that the foregoing is true and correct. Electronic Submission #507629 verified by the BLM Well Information System For CROSS TIMBERS ENERGY LLC, sent to the Hobbs Committed to AFMSS for processing by PRISCILLA PEREZ on 03/18/2020 (20PP1344SE)	
Name (Printed/Typed) CONNIE BLAYLOCK	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 03/18/2020

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By ACCEPTED	JONATHON SHEPARD Title PETROELUM ENGINEER	Date 04/21/2020
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 Hobbs

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 ****
Accepted for Record Only

XZ NMCD 4-24-20

Revisions to Operator-Submitted EC Data for Sundry Notice #507629

	Operator Submitted	BLM Revised (AFMSS)
Sundry Type:	WRK SR	WRK SR
Lease:	NMLC060967	NMLC060967
Agreement:		8910088140 (NMNM71040X)
Operator:	CROSS TIMBERS ENERGY LLC 400 W 6TH ST FORT WORTH, TX 76102 Ph: 817-334-7747	CROSS TIMBERS ENERGY LLC 700 W 7TH STREET FORT WORTH, TX 76102 Ph: 817.334.7842
Admin Contact:	SAMANNTHA AVARELLO REGULATORY TECHNICIAN E-Mail: SAVARELLO@MSPARTNERS.COM Ph: 817-334-7747	SAMANNTHA AVARELLO REGULATORY TECHNICIAN E-Mail: savarello@mspartners.com Ph: 817-334-7747
Tech Contact:	CONNIE BLAYLOCK REGULATORY ANALYST E-Mail: CBLAYLOCK@MSPARTNERS.COM Ph: 817-334-7882	CONNIE BLAYLOCK REGULATORY ANALYST E-Mail: CBLAYLOCK@MSPARTNERS.COM Ph: 817-334-7882
Location:		
State:	NM	NM
County:	LEA	LEA
Field/Pool:	MALJAMAR	MALJAMAR
Well/Facility:	SEMGS AU 105 Sec 30 T17S R33E NWSE 2490FSL 1595FEL	SEMGS AU 105 Sec 30 T17S R33E NWSE Tract 1 2490FSL 1595FEL

SEMGS AU #105 REPAIR TUBING/PACKER FAILURE -SUBSEQUENT REPORT

MIRU, POOH w/tubing and packer.

RIH w/RBP and set at 3840. Pressure tested w/500 psi.

Repaired wellhead. Tested casing to 500 psi - held, no leaks. Back filled around well head.

RIH w/RBP retrieval tool, released and pulled RBP. PU & tested in-hole 2 3/8 in. IPC and Arrowset pkr with on/off tool. Set packer at 3832, EOP at 3835.

Tested backside at 500 psi – held. Released from on/off tool, circulated packer fluid. Latched onto on/off tool. Ran successful MIT – Start 580 psi, End 575 psi. Chart attached. RDMO.

HOBBS OCD

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

APR 22 2020

BRADENHEAD TEST REPORT

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Operator Name Cross Timbers Energy, LLC	API Number 30-025-26512
Property Name Southeast McJannet GA/SA UNIT	Well No. 105

7. Surface Location

UL - Lot	Section	Township	Range	Feet from	N/S Line	Feet From	E/W Line	County
J	30	17S	33E	2490	FSL	1595	FEL	LEA

Well Status

TA'D Well YES <input type="radio"/>	SHUT-IN YES <input type="radio"/>	INJECTOR INJ <input checked="" type="radio"/>	PRODUCER OIL <input checked="" type="radio"/> GAS <input type="radio"/>	DATE 3-12-20
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OBSERVED DATA

	(A) Surf-Interm	(B) Interm(1)	(C) Interm(2)	(D) Prod Csmg	(E) Tubing
Pressure	-0-	n/a	n/a	-0-	-0-
Flow Characteristics					
Puff	Y/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	CO2 <input type="checkbox"/>
Steady Flow	Y/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	WTR <input checked="" type="checkbox"/>
Surges	Y/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	GAS <input type="checkbox"/>
Down to nothing	N/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	If applicable type
Gas or Oil	Y/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	fluid injected for
Water	Y/N <input checked="" type="radio"/>	Y/N	Y/N	Y/N <input checked="" type="radio"/>	Waterflood

If bradenhead flowed water, check all of the descriptions that apply:

CLEAR	FRESH	SALTY	SULFUR	BLACK
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Remarks: Please state for each string (A,B,C,D,E) pertinent information regarding bleed down or continuous build up if applies.

POST WORKOVER
 START - 580#
 END - 575#
 CAL DATE - 11/7/19
 SER# 11218
 Gandy #4 1000# 32 min

Signature:	OIL CONSERVATION DIVISION
Printed name: KEVIN BENNETT	Entered into RBDMS
Title:	Re-test
E-mail Address:	
Date: 3/12/20	
Phone:	
Witness:	

