Form 3160-5 (April 2004)

OCD-HOBBS

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED OM B No. 1004-0137 Expires: March 31, 2007

5. Lease Serial No. NMNM40448

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for patched abandoned well. Use Form	6. If Indian, Allottee or Tribe Name		
	Other instructions on reverse side.	7. If Unit or CA/Agreement, Name and/or No.	
1. Type of Well ☐ Gas Well ☐ Gas Well	8. Well Name and No.		
2. Name of Operator NADEL AND GUSSMAN H	Bola 7 Federal Com #3 9. API Well No.		
Ba. Address PO BOX 1936 ~ ROSWELL NM 88202-1936	30-025-35535 10. Field and Pool, or Exploratory Area		
4. Location of Well (Footage, Sec., T., R., M., or Surve	Young, North Bone Springs		
Unit H, 1650' FNL & 330' FEL Sec 7: T18S, R32E	11. County or Parish, State Lea, New Mexico		
12. CHECK APPROPRIATE	BOX(ES) TO INDICATE NATURE OF NOTICE,	REPORT, OR OTHER DATA	
TYPE OF SUBMISSION	TYPE OF ACTION		
Acidize	ing Fracture Treat Reclamatio Repair New Construction Recomplete	y Abandon Change of Name of Well	
	If the operation results in a multiple completion or recomplet Notices shall be filed only after all requirements, including rem.)		
Note: Change of Name from Bola 7 Fed #3 I have included a copy of a Dedication Pla		APPROVED	
SUBJECT TO LIZE APPROVAL BY STATE	RECEIVED MAR 0 3 2011 HOBBSUCD	FEB 2 6 2011 /s/ JD Whitlock Jr BUREAU OF LAND MANAGEMENT CARLSBAD FIELD OFFICE	
14. I hereby certify that the foregoing is true and Name (Printed/Typed) Tammy R. IJink	Correct Title Production Tech		
Signature and R. Dik	Date	01/26/2011	
THIS SPA	ACE FOR FEDERAL OR STATE OFFIC	CE USE	
Approved by	PETROLEUM	ENGINEER Date MAR U 4 2011	
Conditions of approval, if any, are attached. Approval certify that the applicant holds legal or equitable title to	al of this notice does not warrant or	V	

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.

Office

which would entitle the applicant to conduct operations thereon.

RECEIVED

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Avenue, Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico

Form C-10

Energy, Minerals & Natural Resources Department BS Commit to Appropriate District Offic

1220 South St. Francis Dr. Santa Fe, NM 87505

State Lease - 4 Copic

Fee Lease - 3 Copic

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number		i	Pool Cod	e j	Pool Name					
				65350	1		Young, North B	one Spring		
⁴ Property Code				⁵ Property Name				6,	⁶ Well Number	
30501	6		BOLA 7 FEDERAL COM						611	
⁷ OGRID	No.	⁸ Operator Name					⁹ Elevation			
25846	2	NADEL AND GUSSMAN HEYCO, LLC						3,784'		
¹⁰ Surface Location										
UL or lot no.	Section	Township	Rang	Lot Id	Feet from the	North/South lin	Feet from th	East/West lin	Coun	
G	7	188	32E		1740'	NORTH	1,980'	EAST	LEA	
11 Bottom Hole Location If Different From Surface										
UL or lot no.	Section	Township	Rang	Lot Id	Feet from th	North/South lin	Feet from ti	East/West lir	Coun	
Е	7	188	32E		1750'	NORTH	330'	WEST	LEA	
12 Dedicated Acres	Joint or	r Infill 14 C	onsolidation (Code 15 Or	đer No.					
280	Ì	Ì								

No allowable will be assigned to this completion until all interests have been consolidated or a non-standard unit has been approved by the division.

<u> </u>	 		
#1	⊗ #1	⊗ #2	17 OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the least including the proposed bottom hole location or has a right to drill this well at this location
#6H-BHL	#3 BHL		pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order terretofule embod by the division.
•	•	#3 SHL	Signature Date 1/25/11 Printed Name: Tanuny R. Link
			18SURVEYOR CERTIFICATION
			I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true
			and correct to the best of my belief. Date of Survey Signature and Seal of Professional Surveyor:
			Certificate Number