

## **United States Department of the Interior**

## **BUREAU OF LAND MANAGEMENT**

Farmington District Office 6251 College Blvd., Suite A Farmington, New Mexico 87402 www.blm.gov/nm



In Reply Refer To: NMSF076958 3162.3-1 (211)

RCVD MAY 2 '13 OIL CONS. DIV. DIST. 3

May 1, 2013

Burlington Resources O & G Co. P.O. Box 4289 Farmington, NM 87499

Dear Sir/Madam:

The Bureau of Land Management has withdrawn this APD per your request. Reference is made to your Application for Permit to Drill (APD) for the following well(s):

Albright #10S located 1795' FNL and 845' FEL, Section 22, T29N, R10W, San Juan County, New Mexico on Federal Lease No. NMSF076958 API # 3004534965

The APD has expired, therefore, the application for permit to drill is being returned with no further action taken.

Sincerely,

Virginia Barber

Petroleum Management Team

cc: Well file NMOCD A

Form 3160-5 (August 2007)

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

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

5. Lease Serial No.

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				31 -07 0930		
				6. If Indian, Allottee or Tribe Name		
	this form for proposals t					
abandoned	well. Use <u>Form 3160-3 (A</u>	(PD) for such prope	sals.,			
SUBMIT IN TRIPLICATE - Other instructions on pag				7. If Unit of CA/Agreement	i, Name and/or No.	
I. Type of Well		APR 24 2	การ			
Oil Well	Gas Well Other	111 C4 Z	บเว	8. Well Name and No.		
Former 1				Albright 10S		
2. Name of Operator  Bureau of Land Manager				9. API Well No.		
Burlington Resources Oil & Gas Company Epd Manageme.			30	0-045-34965		
3a. Address		3b. Phone No. (include area code)		10. Field and Pool or Exploratory Area		
PO Box 4289, Farmington, NM 87499		(505) 326-9700		Basin Fruitland Coal		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)				11. Country or Parish, State		
Surface UL H (SE	., Sec. 22, T29N, R10W		San Juan	, New Mexico		
12. CHECK T	HE APPROPRIATE BOX(ES)	TO INDICATE NATU	RE OF NO	TICE, REPORT OR OT	THER DATA	
· · · · · · · · · · · · · · · · · · ·						
TYPE OF SUBMISSION		TYPE OF ACTION				
X Notice of Intent	Acidize	Deepen	P	roduction (Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture Treat	R	teclamation	Well Integrity	
Subsequent Report	Casing Repair	New Construction	⊢⊓R	Recomplete	X Other	
	Change Plans	Plug and Abandon	=	emporarily Abandon	Rescind APD	
		<b>글 ~</b>	· =		Reschiu AF D	
Final Abandonment Notice  13. Describe Proposed or Completed Op-	Convert to Injection	Plug Back		Vater Disposal		
<u>-</u>				• •	oved on 5/14/2009. We have d.	
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•						
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		•				
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Type	ed)				
Kenny Davis		Title Staff	Title Staff Regulatory Technician			
			/	/		
Signatura XIIII			1/23/1	?? .	1	
Signature Date // // S						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by			T -			
V20 10				15	417	
Dawy			Title		Date 5-13	
Conditions of approval, if any, are attach	• •	•				
that the applicant holds legal or equitable	= -	se which would	Office	BLM-FO	$\sim$	
entitle the applicant to conduct operation		<u> </u>	10011 1 C			

(Instruction on page 2)

false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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