

Form 3160-5 (February 2005)

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

SEP 04 2013

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

Farmington Field Offices and REPORTS ON WELLS Land Manager						25. Lease Serial No. 25. MMSF-078362				
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name					
SUBMIT IN TRIPLICATE – Other instructions on page 2.					7. If Unit of CA/Agreement, Name and/or No.					
1. Type of Well					0.117.113		y			
Oil Well Gas Well Other					8. Well Name and No. Chaco 2307-12E #168H					
2. Name of Operator WPX Energy Production, LLC					9. API Well No. 30-039-31173					
3a, Address PO Box 640 Aztec, NM 8	3b. Phone No. (include area code) 505-333-1822				10. Field and Pool or Exploratory Area Lybrook Gallup					
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Sur: 1492' FNL & 303' FWL, sec 12, T23N, R7W BHL:563' FNL &379' FWL, Sec 11, T23N, R7W					11. Country or Parish, State Rio Arriba, NM					
12, CHECK T	HE APPROPRIATE BOX(I	ES) TO INDICATE NAT	URE (	OF NOTICE, RE	EPORT O	R OTHER I	DATA			
TYPE OF SUBMISSION TYPE OF ACTION										
Notice of Intent	Acidize  Alter Casing  Casing Repair	Deepen Fracture Treat New Construction		(Start/Resur	ne) nation	☐ We	ter Shut-Off  Il Integrity er GAS DELIVER	v		
Subsequent Report	Change Plans	Plug and Abandon		Tempo	•		O GAS DELIVER	<u>-</u> -		
Final Abandonment Notice	Convert to Injection	Plug Back		Water	Disposal					
13. Describe Proposed or Complete duration thereof. If the proposa all pertinent markers and zones subsequent reports must be file recompletion in a new interval, requirements, including reclam	I is to deepen directionally of Attach the Bond under wh d within 30 days following a Form 3160-4 must be file ation, have been completed	or recomplete horizontally ich the work will be perfo completion of the involve d once testing has been or and the operator has determined to the operator has determined to the complete t	, give rmed d oper omplet rmined	subsurface local or provide the B rations. If the op- ted. Final Aband I that the site is r	tions and ond No. c eration res lonment N	measured as on file with sults in a mi Notices mus	nd true vertical dep BLM/BIA. Require ultiple completion of t be filed only after	ths of d or		
The <b>GL GAS</b> was delivered of	on 9/3/13 @ 1557 hrs.	The initial flow rate	was 4	106mcfd.			ROVD SEP 1	0:13		
Project Type: PERMANENT DELIVERY				DIL CONS. DIV.						
MC #: 31702					DIST. 3					
Casing Pressure: 504								•		
Tubing Pressure: 112								a 1		
Line Pressure: 31						CON	FIDENTI	AL		
Permanently connected to B	EELINE									
14. I hereby certify that the foregoing Name (Printed/Typed)	is true and correct.									
LARRY HIGGINS				Title PERMIT SUPRV						
Signature Con /	trac =		Date	9/4/13						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE CEPTED FOR RECORD										
Approved by										
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify the applicant holds legal or equitable title to those rights in the subject lease which would entit applicant to conduct operations thereon.			that e the	Title Office		860	5 2013			
Trpsai 15 Island operations thereo					FARA		NEIELDOF			

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