Form 3160-5 (August 2007) FORM APPRO DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT FORM APPRO OMB No. 1004 Expires: July 31 NOV 20 2013 BUREAU OF LAND MANAGEMENT 5. Lease Serial No. Form SUNDRY, NOTICES AND REPORTS ON WELLS DEPARTMENT 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 an Submit IN TRIPLICATE - Other instructions on page 2. 1. Type of Well X Gas Well Other 2. Name of Operator 9. API Well No. Burlington Resources Oil & Gas Company LP 30-039-2	1, 2010 2694 1 nd/or No.	
Image: Supprise of Well NM-01: Supprise of Well Submit in triplicate - Other instructions on page 2. 7. If Unit of CA/Agreement, Name and No. Supprise of Well Submit in triplicate - Other 8. Well Name and No. Supprise of Well Supprise of Well 9. API Well No.	2694 T nd/or No.	
Image: Supprise of Well NM-01: Supprise of Well Submit in tripping of the sector of the s	r nd/or No.	
Dimonstructions of proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals. 7. If Unit of CA/Agreement, Name and San Juan 3 SUBMIT IN TRIPLICATE - Other instructions on page 2. 7. If Unit of CA/Agreement, Name and San Juan 3 I. Type of Well Sas Well Oil Well X Gas Well Other 8. Well Name and No. San Juan 30- San Juan 30- 2. Name of Operator 9. API Well No.		
SUBMIT IN TRIPLICATE - Other instructions on page 2. 7. If Unit of CA/Agreement, Name a I. Type of Well San Juan 3 Oil Well X Gas Well Other 8. Well Name and No. San Juan 30- 2. Name of Operator 9. API Well No.		
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Oil Well X Gas Well Other 8. Well Name and No. San Juan 30- 2. Name of Operator 9. API Well No.	30-6 Unit	
	7733	
Ba. Address 3b. Phone No. (include area code) 10. Field and Pool or Exploratory Ar PO-Box 4289, Farmington, NM-87499 (505)-326-9700 Basin Fruit	rea	
Image: Contract of Well (Footage, Sec., T.,R.,M., or Survey Description) 11. Country or Parish, State		
	New Mexico	
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER D	IOTICE, REPORT OR OTHER DATA	
TYPE OF SUBMISSION TYPE OF ACTION		
Notice of Intent Acidize Deepen Production (Start/Resume) Alter Casing Fracture Treat X Reclamation	Water Shut-Off	
Alter Casing Fracture Treat X Reclamation X Subsequent Report Casing Repair New Construction Recomplete	Well Integrity Other	
Final Abandonment Notice Change Plans Plug and Abandon Temporarily Abandon Final Abandonment Notice Convert to Injection Plug Back Water Disposal		
Indi Adaddimicit Notice Convert to injection Convert to in	duration thereof	
The subject well was P&A'd on 6/24/13. This is a twinned location and reclamation will not take plac well (San Juan 30-6 Unit 84A) is also P&A'd.	e until the twin	
RCVD DEC	C 16'13	
OIL CONS DIST	5. DIV.	
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)	<u>.</u>	
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Denise Journey Title Regulatory Technician		
Denise Journey Title Regulatory Technician		
Denise Journey Title Regulatory Technician Signature Initian 11/20/2013 Date Date THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Brough Chief	DEC 10 201	
Denise Journey Title Regulatory Technician Signature 11/20/2013 Date 11/20/2013 THIS SPACE FOR FEDERAL OR STATE OFFICE USE Approved by Denixe Chief THIS SPACE FOR FEDERAL OR STATE OFFICE USE Onditions 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	DEC 10 201	
Signature Divide This Space FOR FEDERAL OR STATE OFFICE USE International Procession and K Approved by Math Chief Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify		



Reclamation Form:	
Date: 11/11/13	
Well Name: SAN JUNN 30-6 #4613 (PrA)	
Footages: <u>1525' FNL + 870' FWL</u> Unit Letter:	
Section: <u>//</u> , T- <u>30</u> -N, R- <u>7</u> -W, County: Roderton State: <u>N</u>	<u>IM</u>
Reclamation Contractor:	
Reclamation Start Date:	
Reclamation Complete Date:	
Road Completion Date:	
Seeding Date:	
**PIT MARKER STATUS (When Required): Picture of Marker set needed	l
MARKER PLACED :(E	DATE)
LATATUDE:	
LONGITUDE:	
Pit Manifold removed(DATE)
Construction Inspector: GIAVEZ Date: _////3	<u>.</u>
Inspector Signature:	<u>10</u>
Office Use Only: SubtaskDSMFolderPictures	•
Revised 6/14/2012	
* NO RECLAMATION NEEDED - TWINNERD	WETH SJ 30-6 84