		RE		VED			
Form 3160-5 (August 2007)	UNITED STAT DEPARTMENT OF THE BUREAU OF LAND MA	NAGEMENT	IAR 03	2014 омв и	APPROVED Jo. 1004-0137 : July 31, 2010		
	NDRY NOTICES AND REP	Farmi Bureau o	nyion rie of Land N	anagom.an.	F-079383		
SUI Do not us	NDRY NOTICES AND REP e this form for proposals	ORTS ON WELLS ^{***} to drill or to re-ente	r an	6. If Indian, Allottee or Tribe	Name		
	I well. Use Form 3160-3 (A		osals		·····		
SUBMIT IN TRIPLICATE - Other instructions on page 2. 1. Type of Well				7. If Unit of CA/Agreement, Name and/or No. San Juan 30-6 Unit			
Oil Well X Gas Well Other				8. Well Name and No.			
			San Juan 30-6 Unit 95R				
2. Name of Operator	gton Resources Oil & Gas	9. API Well No. 30-039-20520					
3a. Address	3b. Phone No. (include area code)		10. Field and Pool or Exploratory Area				
PO Box 4289, Farmington, NM 87499		(505) 326-9700		La Jara Pictured Cliffs			
4. Location of Well (Footage, Sec., T., I Surface Unit M (WL, Sec. 26, T30N,	R7W	W Rio Arriba , New Mexico				
12. CHECK	THE APPROPRIATE BOX(ES	TO INDICATE NATUR	RE OF NO	TICE, REPORT OR OTH	IER DATA		
TYPE OF SUBMISSION]		PE OF AC	CTION			
Notice of Intent	Acidize	Deepen	P	roduction (Start/Resume)	Water Shut-Off		
	Alter Casing	Fracture Treat	□ R	eclamation	Well Integrity		
Subsequent Report	Casing Repair	New Construction	R	ecomplete	X Other FAN (TWIN)		
r	Change Plans	Plug and Abandon		emporarily Abandon			
X Final Abandonment Notice 13. Describe Proposed or Completed O	Convert to Injection	Plug Back		/ater Disposal			
determined that the site is ready fo The subject well was 30-6 Unit 95P (API #30 the twinned well is re	P&A'd on 4/5/04. Reclama 003930922) which is a pro	ation cannot be con ducing well. Recla	npleted a mation of	s this well is twinned this location will be	I with the San Juan		
					RCVD MAR 7'14		
					OIL CONS. DIV.		
					DIST. 3		
14. I hereby certify that the foregoing is Do	s true and correct. Name (Printed/Typ	ed)		Staff Regulatory Te	chnician		
		Title					
Signature	L Busse	Date	3/3/	14			
	THIS SPACE FC	R FEDERAL OR ST	TATE OFF				
Approved by	1. Il con		Title	B r anch Chiof	MAR - 5 2014		
Conditions of approval, if any, are attact that the applicant holds legal or equitab entitle the applicant to conduct operation	le title to those rights in the subject leases thereon.	se which would	Office	al Profection and			
Title 18 U.S.C. Section 1001 and Title false, fictitious or fraudulent statements			and willfully	to make to any department or a	gency of the United States any		
(Instruction on page 2)	or representations as to any matter wi		M	<u> </u>			

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