Form 3160-5 (February 2005)

UNITED STATES

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FORM APPROVED

	EPARTMENT OF TH		11 10	1000	41	OMB No. 1004-0137 Expires: March 31, 2007		
ВС	JREAU OF LAND MA	ANAGEMENI	JUI	4 30 50	5 Lease	Serial No.		
SUNDRY N	NOTICES AND REPO	ORTS ON WELLS			NMSF-			
	form for proposals					ans Allottee or Tribe Name		
abandoned well. Use Form 3160-3 (APD) for such proposals.								
SUBMIT IN TRIPLICATE – Other instructions on page 2. 1. Type of Well					7. If Unit	of CA/Agreement, Name and/or No.		
1. Type of Well						Vame and No.		
Oil Well Gas Well Other						2307-13I #187H		
2. Name of Operator WPX Energy Production, LLC					9. API Well No. 30-039-31208			
3a. Address 3b. Phone No. (include area code)					10. Field and Pool or Exploratory Area			
PO Box 640 Aztec, NM 87410 505-333-1806					Lybrook Gallup			
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Sur: 1742' FSL & 296' FEL, Sec 13, T23N, R7W BHL: 1884' FNL & 330' FEL, Sec 14, T23N, R7W					11. Country or Parish, State Rio Arriba, NM			
12. CHECK T	HE APPROPRIATE BOX(E	S) TO INDICATE NAT	URE OF	NOTICE, RÉ	EPORT OF	R OTHER DATA		
TYPE OF SUBMISSION TYPE OF ACTION								
Notice of Intent	Acidize	Deepen		Production (Start/Resur		Water Shut-Off		
	Alter Casing	Fracture Treat		Reclan	nation	Well Integrity		
N-7	Casing Repair	New Construction		Recom	plete	Other SPUD/SURFACE CASING		
Subsequent Report	Change Plans	Plug and Abandon	ı	Tempo	orarily	<u> </u>		
Final Abandonment Notice	Convert to Injection	Plug Back			Disposal			
all pertinent markers and zones subsequent reports must be file	Attach the Bond under whi d within 30 days following c	ch the work will be perfo ompletion of the involve	ormed or p	provide the Bons. If the ope	ond No. or eration resu	neasured and true vertical depths of in file with BLM/BIA. Required ults in a multiple completion or obtices must be filed only after all nal inspection. CONS. DIV DIST. 3		
6/28/14 - SPUD @ 900 HRS , TD 12-1/4" SURF HOLE @ 430', 1830HRS.						JUL 02 2014		
6/29/14 - RAN 13 JTS, 9-5/8", L' Pump 10 bbls FW spacer, & 51 b good cmt to surface. RDMO Mo-Te	obls Type G cmt (245 sxs)	@ 15.8 PPG. Drop plu				ump plug @ 148 psi. <u>Circ 2</u> 5 bbls		
14. I horoby certify that the foregoing	is true and correct							
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)				D 1				
Mark Heil Title				egulatory S	pecialist			
Signature Vu.			Date 6					
	THIS SPACE FO	R FEDERAL OR S	STATE	OFFICE	USE			
Approved by								
Conditions 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 entitle the applicant to conduct operations thereon.						Date		
Title 18 U.S.C. Section 1001 and Title United States any false, fictitious or fra					to make to	any department or agency of the		

(Instructions on page 2)

ACCEPTED FOR RECORD

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