Form 3160-5 (August 2007)	UNITED STAT DEPARTMENT OF THE BUREAU OF LAND MAN	INTERIOR		FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010		
				5. Lease Serial No. SF-078134		
SUNDRY NOTICES AND REPORTS ON WELLS				6. If Indian, Allottee or Tribe Name		
	this form for proposals t well. Use Form 3160-3 (A					
	BMIT IN TRIPLICATE - Other ins		AHO C	7. If Unit of CA/Agreement, 1	Name and/or No.	
1. Type of Well Oil Well	Gas Well Other	· · ·	AUU 4	8. Well Name and No.		
2. Name of Operator				9"API-Well No.	ndell SRC 2	
Burlington Resources Oil & Gas Compar			·		045-10472	
3a. Address 3b. Phone PO Box 4289, Farmington, NM 87499 4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)			ea code) 700	10. Field and Pool or Exploratory Area Blanco Mesaverde		
4. Location of Well (Footage, Sec., T., I Surface UNIT M (S	11. Country or Parish, State San Juan	, New Mexico				
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA						
TYPE OF SUBMISSION TYPE OF ACTION						
Notice of Intent	Acidize	Deepen Fracture Treat		roduction (Start/Resume)	Water Shut-Off Well Integrity	
X Subsequent Report	Casing Repair	New Construction		Lecomplete	X Other Tubing Repair	
✔ Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back		emporarily Abandon Vater Disposal	to P&A	
determined that the site is ready for 8/15/14 - MIRU A-Plus 8/18/14 - TIH w/ 4 1/2" 8/19/14 - RU WL. Ran 8/20/14 - TIH w/ work s 8/21/14 - Excavated 8' 8/21/14 - Notified Age from Troy Salyers (BL	12. ND WH. NU BOPE. If RBP & set @ 4162'. PT 4 1 CBL from 4150' to surface. tring. ND BOPE. NU WH. diameter x 4' deep around ncies of holes in casing a .M) and Charlie Perrin (NI DCD has given us 60 days	PT BOPE. Test OK I/2" casing - test go RD WL. wellhead w/ hydro- ind plan forward to VIOCD) to move of	TOOH w od. vac, found P&A the & procee	// 2 3/8" tubing. 4 4 holes in surface cat wellbore. Received	RCVD SEP 9'14 OIL CONS. DIV. DIST. 3 sing. verbal approavl	
P&A NOI and Procedu		SEP 05 2014				
FARMINGTON FIELD OFFICE BY: TL Salvers						
14. I hereby certify that the foregoing	s true and correct. Name (Printed/T)	ped)				-
DENISE JOURNEY			STAFF REGULATORY TECHNICIAN			-
Signature A MUM MMALLA			8/22/2014			
	· · · · · · · · · · · · · · · · · · ·	R FEDERAL OR S	TATE OFF	FICE USE	· · ·	-
Approved by						=
	-		Title		Date	
Conditions of approval, if any, are atta that the applicant holds legal or equita entitle the applicant to conduct operati	ease which would	Office	ffice ·			
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 false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.						
(Instruction on page 2)						n.
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