

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

CONFIDENTIAL

FORM APPROVED  
OMB No. 1004-0137  
Expires: October 31, 2014

**SUNDRY NOTICES AND REPORTS ON WELLS**  
**Do not use this form for proposals to drill or to re-enter an  
abandoned well. Use Form 3160-3 (APD) for such proposals.**

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

DEC 31 2014

2. Name of Operator  
Encana Oil & Gas (USA) Inc.

Farmington Field Office  
Bureau of Land Management

3a. Address  
370 17th Street, Suite 1700  
Denver, CO 80202

3b. Phone No. (include area code)  
720-876-5867

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
SHL: 739' FSL, 2512' FEL Section 1, T23N, R6W  
BHL: 330' FSL, 1920' FEL Section 12, T23N, R6W

5. Lease Serial No.  
NMMN 118127

6. If Indian, Allottee or Tribe Name  
N/A

7. If Unit of CA/Agreement, Name and/or No.  
N/A

8. Well Name and No.  
Lybrook 001-2306 02H

9. API Well No.  
30-039-31221

10. Field and Pool or Exploratory Area  
Counselors Gallup Dakota

11. County or Parish, State  
Rio Arriba County, New Mexico

12. CHECK THE APPROPRIATE BOXES TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Intermediate
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Casing/Cement
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

Set intermediate casing string 11/10/14. Gelled freshwater mud system.

OIL CONS. DIV DIST.

Hole diameter: 8.75", casing diameter: 7", casing weight and grade: 26ppf J-55 LTC. Depth of 8.75" hole from 0-5720'TVD/MD.

JAN 12 2015

Casing set from surface to 5640'MD. No DV Tool. Top of float collar at 5593' MD. TOC at surface and BOC at 5640'MD. ✓

Lead Cement pumped 11/11/14: 526 sks Premium Lite FM + 3% CaCl<sub>2</sub> + 0.25#/sk Celloflake + 5#/sk LCM-1 + 8% Bentonite + 0.4% FL-52A + 0.4% Sodium Metasilicate, mixed at 12.1 ppg, yield 2.13 cuft/sk.

Tail Cement pumped 11/11/14: 400 sks Type III Cement + 1% bwoc CaCl + 0.25 lbs/sk cello flake + 0.2% bwoc FL-52A, yield 1.38 cuft/sk, mixed at 14.6 ppg. 94 bbls circulated to surface. WOC 8 hours.

Tested BOP 11/12/14 to 3000# for 30minutes. No pressure drop. Tested casing 11/12/14 to 1500# for 30 minutes. No pressure drop. ✓

Started drilling out cement 11/12/14.

ACCEPTED FOR RECORD

JAN - 9 2015

FARMINGTON FIELD OFFICE  
BY: D. PORCH

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Cristi Bauer

Title Operations Technician

Signature

Cristi Bauer

Date

12/30/14

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

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.

Office

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.

(Instructions on page 2)

NMOCDA