(August 2007) DEPARTMEN BUREAU OF L SUNDRY NOTICES A Do not use this form for p abandoned well. Use Form SUBMIT IN TRIPLICAT 1. Type of Well Oil Well X Gas Well Other 2. Name of Operator ENERCEN RESOURCES CORPORATION 3a. Address 2010 Afton Place, Farmington, NM, 87 4. Location of Well (Footage, Sec., T., R., M., or Survey D	A 3160-3 (APD) for such         E - Other instructions on         3b. Pl         7401         Description)	e-enter an proposals. Farmington Field Office	
12. CHECK APPROPRIATE	BOX(ES) TO INDICAT	E NATURE OF NOTICE, RE	
TYPE OF SUBMISSION		TYPE OF ACTIC	
Notice of Intent X Subsequent Report Final Abandonment Notice 13. Describe Proposed or Completed Operation (clearly If the proposal is to deepen directionally or recompl Attach the Bond under which the work will be perf following completion of the involved operations. If testing has been completed. Final Abandonment N determined that the final site is ready for final inspect The final reclamation has been completed.	ete horizontally, give subsurfac formed or provide the Bond No f the operation results in a mult otices shall be filed only after ction.) mpleted for the subje	Deepen       Product         Fracture Treat       Reclan         New Construction       Recommodiant         Plug and Abandon       Tempo         Plug Back       Water         uding estimated starting date of any tee locations and measured and true to on file with BLM/BIA. Require tiple completion or recompletion in all requirements, including reclamed and true to the starting date of any terminal requirements.	tion (Start/Resume) Water Shut-Off hation Well Integrity plete X Other <u>final</u> rarily Abandon <u>reclamation</u> Disposal proposed work and approximate duration thereof. vertical depths of all pertinent markers and zones. d subsequent reports shall be filed within 30 days a new interval, a Form 3160-4 shall be filed once
OILC	ions. Div dist. 3		
	for Record		
APR 1 3 2015 APR 1 3 2015			R - 9 2015
	· ·		1. Kelly
<ul> <li>14. I hereby certify that the foregoing is true and correct Name (<i>Printed/Typed</i>)</li> <li>Anna Stotts</li> </ul>	Т	itle Regulatory Anal	yst
Signature Anna Stolt	E	Date 03/27/15	
THIS	SPACE FOR FEDERAL	OR STATE OFFICE USE	
Approved by		Title	Date
Conditions of approval, if any, are attached. Approval of this notic the applicant holds legal or equitable title to those rights in the sub entitle the applicant to conduct operations thereon. Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, m	ject lease which would	Office	artment or agency of the United States any false

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