Form 3160-5 (March 2012) UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to receptor on 2014				5. Lease Serial No. NM 28748 6. If Indian, Allottee of	ORM APPROVED DMB No. 1004-0137 pires: October 31, 2014	
abandoned we	II. Use Form 3160-3 (A	PD) for such pi	oposalŝ.	7. If Unit of CA/Agree	munt Name and/ar Na	
SUBMIT IN TRIPLICATE - Other instructions on page 2: Concerned to the concerned of the conc				N/A	ment, Name and/or No.	
Oil Well Gas Well Other				8. Well Name and No. Lybrook H26-2307 0	8. Well Name and No. Lybrook H26-2307 02H	
2. Name of Operator Encana Oil & Gas (USA) Inc.				9. API Well No. 30-043-21133	9. API Well No. 30-043-21133	
			(include area code) 10. Field and Pool or Exploratory Area Basin Mancos			
4. Lucation of Well (Footage, Sec., T.,R.,M., or Survey Description) SHL: 2227' FNL and 357' FEL Section 26, Township 23 North, Range 7 West BHL: 1557' FNL and 349' FWL Section 26, Township 23 North, Range 7 West			11. County or Parish, State Sandoval County, New Mexico			
	CHECK THE APPROPRIATE BO	X(ES) TO INDICAT	E NATURE OF 1	NOTICE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION TYPE OF ACT				FACTION		
Notice of Intent	Acidize	Deepen Fracture Tre		Production (Start/Resume) Reclamation	Water Shut-Off Well Integrity	
Subsequent Report	Casing Repair	New Constr		Recomplete	Other Tubing,	
Final Abandonment Notice	Change Plans	Plug and At	andon	] Temporarily Abandon ] Water Disposal	Gas Lift Installation	
following completion of the m testing has been completed. I determined that the site is rear Ran 174 joints of 2 7/8" 4.70# F Gas lift installed 08/29/2014.	Pinal Abandonment Notices must b dy for final inspection.) PH-6 tubing on 08/29/2014. En RECEI FEB 1 0 NMO DISTRIC	on results in a multiple be filed only after all r d of tubing at 5883' VED 2015 CD T III	e completion or r equirements, inc	ecompletion in a new interval	, a Form 3160-4 must be filed once a completed and the operator has	
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)						
Cristi Bauer Title Operations Technic						
Signature CHST DALLAR Date 9/29/14						
THIS SPACE FOR FEDERAL OR STATE OFFICE USE						
Approved by						
Conditions of approval, if any, are at that the applicant holds legal or equi entitle the applicant to conduct oper	table title to those rights in the subje ations thereon.	ct lease which would	Title Office		Date	
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)						

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