Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

FORM APPROVED OMB No. 1004-0137

Expires: July 31, 2010 5. Lease Serial No.

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	DRY NOTICES AND REPO	6. If Indian, Allottee or Tribe Name					
	well. Use Form 3160-3 (A				IVFD		
	tructions on page 2.			7. If Unit of CA/Agreement, Name and/or No.			
1. Type of Well Oil Well X Gas Well Other			APR 0		P 2015 HUERFANITO UNIT		
					8. Wèll'Name and No. HUERFANITO UNIT #19		
2. Name of Operator			Farr	nington F	9. API Well No.		
Burlington Resources Oil & Gas 3a. Address			ny LPBureau No. (include area	Mand	30-045-06068		
PO Box 4289, Farmington, NM 87499			(505) 326-9700		BASIN FRUITLAND COAL		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Unit H (SENE), 1450' FNL, 990' F			c. 3, T26N, R9	w	11. Country or Parish, State San Juan , New Mexico		
12. CHECK T	HE APPROPRIATE BOX(ES)	TO IND	ICATE NATUR	E OF NO	TICE, REPORT OR OTH	ER DATA	
TYPE OF SUBMISSION			TYPE OF ACTION				
X Notice of Intent	Acidize	Deep	en	P	roduction (Start/Resume)	Water Shut-Off	
	Alter Casing	Fract	ure Treat	R	eclamation	Well Integrity	
Subsequent Report	Casing Repair	New New	Construction	R	ecomplete	X Other	
(DT)	Change Plans	≓	and Abandon	===	emporarily Abandon	TUBING REPAIR	
Final Abandonment Notice 13. Describe Proposed or Completed Op	Convert to Injection		Back	<u></u>	Vater Disposal		
3/27/15 MIRU AWS 731. w/mill & made run to 19 valves. ND BOP. Cut off to fomer & 1 gal Corrosion of 2-3/8", 4.7# J-55 tubing 8	H w/GR to 2093'. POOH. T ND WH. NU BOP. PT-lost p 30'. RU WSI. RIH w/5-1/2 bg head. NU WH. NU BOP inhibitor. Flowed well. 4/ & set @ 2088' (new setting 4 bbls of 2% KCL & pump	oressure " RBP & . PT - go 1/14 ND depth)	e. Pulled tbg h set @ 50'. Lo bod test. Rele BOP. RIH & w/FN set @ 2	nanger. 3 pad hole eased RB landed 6 086'. NE	& PT - to 500#/ PT faili P & POOH. RIH w/tbg. 8 jts of) BOP, NU WH. Load &	ed. Leaking thru casing C/O wellbore w/air, 1 gal	
		AU 86	NO DIVIDIO	1 TF 6	accepted s	FOR RECORD	
	•	UIL GU	NS. DIV DIS	1. 3	APR 1	5 203	
APR 1 7 2015					FIELD OFFICE		
14. I hereby certify that the foregoing is true and correct. Name (Printed/Type Patsy Clugston			Staff Regulatory Technician			chnician	
Signature Falsy	fatsy Clush Date 4/6/2015						
	THIS SPACE FO	R FEDI	RAL OR ST	ATE OFF	ICE USE		
Approved by							
				Title		Date	
Conditions of approval, if any, are attach that the applicant holds legal or equitable entitle the applicant to conduct operation	title to those rights in the subject lea		certify	Office			

false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

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