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APR 17 2015

Form 3160-5
(February 2005)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

Farmington Field Office
Bureau of Land Management

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

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		5. Lease Serial No. N0-G-1312-1797
<input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name 791-151
2. Name of Operator WPX Energy Production, LLC		7. If Unit of CA/Agreement, Name and/or No. NMNM133321X
3a. Address PO Box 640 Aztec, NM 87410	3b. Phone No. (include area code) 505-333-1816	8. Well Name and No. S CHACO UT #343H
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: 1349' FNL & 200' FEL SEC 2 22N 7W BHL: 118' FNL & 240' FWL SEC 2 22N 7W		9. API Well No. 30-043-21246
		10. Field and Pool or Exploratory Area LYBROOK GL
		11. Country or Parish, State SANDOVAL, NM

12. CHECK THE APPROPRIATE BOX(ES) 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 type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	SPUD/SURFACE CASING
<input type="checkbox"/> Final Abandonment Notice	<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 recomplate 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 recompletion 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.)

NOTE: MO-TE SET SURFACE:

OIL CONS. DIV DIST. 3

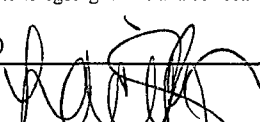
4/15/15-SPUD 12 1/4" @ 08:00 hrs. TD SURF HOLE @ 330

APR 28 2015

RAN 14 JTS, 9-5/8", LT&C, 36#, J-55, CSG SET @ 325, FC @ 299'

Pump 10 bbls FW spacer, dump 28.9 bbls (101 sxs) Type I-II cmt w/ 20% flyash @ 14.5 PPG into casing, drop plug & disp w/ 23.1 bbls H2O, bump plug @ 200 psi, circ 10 bbls good cmt to surface
RDMO Mo-Te.

NOTE: WPX will MI AWS to Install & test BOP at a later date. We will file another sundry at that time. ✓

14. I hereby certify that the foregoing is true and correct.	
Name (Printed/Typed) LACEY GRANILLO	Title PERMITTING TECH.III
Signature 	Date 4/17/15

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

ACCEPTED FOR RECORD

Approved by	Title	Date APR 21 2015
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	FARMINGTON FIELD OFFICE BY: <u>William Tambekou</u>