Form 3160-5 (February 2005)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

Company of an Colored				5. Lease	Serial No.
SUNDRY NOTICES AND REPORTS ON WELLS 1 200 d 16 ones				N0-G-02	207-1610
Do not use this form for proposals to drill or to re-enter an				6. If India	an, Allottee or Tribe Name
abandoned well. Use Form 3160-3 (APD) for such proposals.				Navajo	,
SUBMIT IN TRIPLICATE – Other instructions on page 2.				7. If Unit of CA/Agreement, Name and/or No.	
1. Type of Well				MMMM	133482X
				8. Well N	Jame and No.
Oil Well Gas Well Other					/grook UT #131H
2. Name of Operator				9. API W	
WPX Energy Production, LLC				30-045-3	
3a. Address 3b. Phone No. (include area code)				10. Field	and Pool or Exploratory Area
PO Box 640 Aztec, NM 87410 505-333-1808				Lybrook Unit NW HZ (oil)	
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)				11. Country or Parish, State	
SHL: 258' FSL & 352' FWL SEC 25 T24N R7W				San Juan, NM	
BHL: 685' FNL & 229' FWL SEC 35 T24N R7W					
12. CHECK T	HE APPROPRIATE BOX(I	ES) TO INDICATE NATURE	OF NOTICE, RE	PORT OF	R OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION					
		П	Produc	tion	
Notice of Intent	Acidize	Deepen	(Start/Resun		Water Shut-Off
	Alter Casing	Fracture Treat	Reclam	nation	Well Integrity
					Other GAS
M	Casing Repair	New Construction	Recom	plete	DELIVERY
Subsequent Report			Tempo	rarily	
	Change Plans	Plug and Abandon	Abandon	,	
Final Abandonment Notice	Convert to Injection	Plug Back	Water	Disposal	
all pertinent markers and zones subsequent reports must be file	al is to deepen directionally of a Attach the Bond under whe do within 30 days following a Form 3160-4 must be file action, have been completed	or recomplete horizontally, giv- nich the work will be performed completion of the involved oped and the operator has determine and the operator has determine	e subsurface located or provide the Berations. If the operated, Final Abanded that the site is r	tions and record No. or cration restorment No.	neasured and true vertical depths of n file with BLM/BIA. Required ults in a multiple completion or otices must be filed only after all
Project Type: PERMANENT DELIVERY				/	
MC #: 62385156					ALCEIVED \
Casing Pressure: 600					MAR 1 2 2015
Tubing Pressure: 240					NMOCD /
Line Pressure: 147				1	Disco II
Permanently connected to Be	eeline /				
14. I hereby certify that the foregoing	is true and correct.				
Name (Printed/Typed) Marie E. Jaramillo				111	
Title Territorian					
Signature Date 3/3/15					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE					
Approved by					
			Titlo		Data
Conditions of annual if any and	ached Approval of this nation	does not warrant or cartifu that	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.					ACCEPTANTE MADE