Form 3160-5 (March 2012)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT



FORM APPROVED OMB No. 1004-0137 Expires: October 31, 2014

RECEIVE 5. Lease Serial No. NMNM 118133

SUNDRY	NOTICES AND REPORTS ON WELLS	
not use this	form for proposals to drill or to re-enter an	
donad wall	Hen Form 2460 2 (ADD) for such proposals	

6- If Indian, Allottee or Tribe Name

	orm for proposals to drill (Use Form 3160-3 (APD) for		N/A	
SUBMI	TIN TRIPLICATE – Other instruction		7. If Unit of CA/Agreement, Name and/or No.	
1. Type of Well		nagement		
Oil Well Gas W	ell Other	8. Well Name and No. Escrito D32-2408 011	8. Well Name and No. Escrito D32-2408 01H	
2. Name of Operator Encana Oil & Gas (USA) Inc.		9. API Well No. 30-045-35519		
3a. Address		ne No. (include area code)	10. Field and Pool or Ex	cploratory Area
370 17th Street, Suite 1700 Denver, CO 80202	720-876	6-5867	Basin Mancos Gas Po	ool
4. Location of Well (Footage, Sec., T., SHL:1308' FNL and 282' FWL Section 32, T24' BHL: 438' FNL and 353' FWL Section 31, T24'	R., M., or Survey Description) 4, R8W 4, R8W		11. County or Parish, St San Juan County, NN	
12. CHEC	K THE APPROPRIATE BOX(ES) TO	O INDICATE NATURE OF NOT	TCE, REPORT OR OTHE	R DATA
TYPE OF SUBMISSION		TYPE OF AC	TION	
Notice of Intent	Acidize Alter Casing		oduction (Start/Resume)	Water Shut-Off Well Integrity
✓ Subsequent Report	Casing Repair		complete	Other Initial 24 Hour Test
Final Abandonment Notice	Change Plans Convert to Injection		mporarily Abandon ater Disposal	
following completion of the involve testing has been completed. Final determined that the site is ready for Ready Date: 3/30/2015 Test E Water BBL: 406 Oil Gravity: Un	work will be performed or provide the level operations. If the operation results Abandonment Notices must be filed or r final inspection.) Date: 4/19/2015 Hours Tested inknown Gas Gravity: Unknown Flwg. SI: 292 Csg. Press: 770	in a multiple completion or reconnly after all requirements, includir 1: 24hrs Test Production Production Method: Flowin	npletion in a new interval, agreclamation, have been of the control of the contro	a Form 3160-4 must be filed once completed and the operator has
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Typed)			
Cristi Bauer		Title Operations Techn	nician	
Signature Clin E	BAUGE	Date 4/15/	15	
	THIS SPACE FOR F	EDERAL OR STATE O	FFICE USE	
Approved by				
		Title	D	alere percepa
Conditions of approval, if any, are attache that the applicant holds legal or equitable entitle the applicant to conduct operations	title to those rights in the subject lease w	ant or certify	ADIS	LE FOR

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