Form 3160-5 (August 2007)	UNITED STA DEPARTMENT OF TH BUREAU OF LAND MA	E INTERIOR	AUG 2	OMB No O 2014 Expires: . 5. Lease Serial No.	APPROVED 1004-0137 101y 31, 2010 E LEASE		
Do not us	NDRY NOTICES AND REF e this form for proposals I well. Use Form 3160-3 (to drill or to re-ente	ràn	6. If Indian, Allottee or Tribe N			
	UBMIT IN TRIPLICATE - Other in	structions on page 2.		7. If Unit of CA/Agreement, Na			
1. Type of Well Oil Well	X Gas Well Other	Comm. Agreement 5-1-51 #1-SEC No. 837 8. Well Name and No. Decker A 2					
2. Name of Operator		9. API Well No.					
3a. Address	gton Resources Oil & Ga	30-045-11099 10. Field and Pool or Exploratory Area					
PO Box 4289, Farmingt	on, NM 87499	a code) 700	Basin Dakota				
4. Location of Well <i>(Footage, Sec., T., I</i> Surface Unit C (N	R.,M., or Survey Description) IENW), 860' FNL & 1610'	11. Country or Parish, State San Juan ,	New Mexico				
12. CHECK	THE APPROPRIATE BOX(ES	6) TO INDICATE NATU	RE OF NOT	L	R DATA		
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT OR OTHER DATA TYPE OF SUBMISSION TYPE OF ACTION							
X Notice of Intent	Acidize	Deepen		roduction (Start/Resume)	Water Shut-Off		
	Alter Casing	Fracture Treat		eclamation	Well Integrity		
Subsequent Report	Casing Repair	New Construction	R	ecomplete	X Other		
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back		emporarily Abandon Vater Disposal	FAN		
-	P&A'd on 6/20/92. Recla sources requests that th						
				OIL CONS. DIV DIST. 3			
	SEP 2 3 2015						
14. I hereby certify that the foregoing i	s true and correct. Name (Printed/T) Illie L. Busse	Title	-19-1	Staff Regulatory Tec	hnician		
	THIS SPACE F	OR FEDERAL OR S		A state			
Approved by Conditions of approval, if any, are attact that the applicant holds legal or equitab entitle the applicant to conduct operation Title 18 U.S.C. Section 1001 and Title	ele title to those rights in the subject lons thereon.	ease which would	Title Office	ALIG U 9 2014 FARMINGTON FIELD OFF to make to any department or ag	Date		
false, fictitious or fraudulent statements		vithin its jurisdiction.			/		
(Instruction on page 2)		NMOCD			2 a		

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Submit One Copy To Appropriate District	State of New Mex	kico		Form C-103				
ffice istrict I Energy, Minerals and Natural Resources 525 N. French Dr., Hobbs, NM 88240			March 18, 2009 WELL API NO.					
District II 1301 W. Grand Ave., Artesia, NM 88210	ΟΓ ΔΟΝΟΕΡΙΑΤΙΟΝ ΡΙΙΠΟΟΝ							
District III 1000 Rio Brazos Rd., Aztec, NM 87410	1220 South St. France		5. Indicate Type of Lease STATE FEE					
<u>District IV</u> 1220 S. St. Francis Dr., Santa Fe, NM	Santa Fe, NM 87	6. State Oil & Gas Lease N	0.					
87505	ES AND REPORTS ON WELLS	7. Lease Name or Unit Age	eement Name					
DISTREAMENT ROTTON	LS TO DRILL OR TO DEEPEN OR PLU	RCVD S	EP 8'10					
PROPOSALS.) 1. Type of Well: Oil Well 🛛 O		Decker A OIL GOM	S.DIV.					
		8. Well Number 2 DIST. 3						
2. Name of Operator Burlington Resources Oil & Gas, L	OIL CONS. D	9. OGRID Number 14538						
3. Address of Operator SEP 9 9 2		8 2015	10. Pool name or Wildcat					
P.O. Box 4289, Farmington, NM 8	7499-4289	·	Basin DK					
4. Well Location Unit Letter: <u>C: 860</u> feet from the <u>North</u> line and <u>1610</u> feet from the <u>West</u> line								
Section <u>3</u> Township <u>31</u> Range <u>12</u> NMPM <u>San Juan</u> County <u>NM</u>								
	11. Elevation <i>(Show whether DR, 6108 ' GL</i>	RKB, RT, GR, etc.,						
12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data								
TEMPORARILY ABANDON	ENTION TO: PLUG AND ABANDON CHANGE PLANS MULTIPLE COMPL	SUB REMEDIAL WOR COMMENCE DRI CASING/CEMEN	LLING OPNS.	IG CASING				
OTHER:		Location is re	eady for OCD inspection aft	er P&A				
 All pits have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. Rat hole and cellar have been filled and leveled. Cathodic protection holes have been properly abandoned. A steel marker at least 4" in diameter and at least 4' above ground level has been set in concrete. It shows the 								
OPERATOR NAME, LEASE NAME, WELL NUMBER, API NUMBER, QUARTER/QUARTER LOCATION OR UNIT LETTER, SECTION, TOWNSHIP, AND RANGE. All INFORMATION HAS BEEN WELDED OR PERMANENTLY STAMPED ON THE MARKER'S SURFACE.								
The location has been leveled as nearly as possible to original ground contour and has been cleared of all junk, trash, flow lines and								
other production equipment. Anchors, dead men, tie downs and risers have been cut off at least two feet below ground level.								
If this is a one-well lease or last remaining well on lease, the battery and pit location(s) have been remediated in compliance with OCD rules and the terms of the Operator's pit permit and closure plan. All flow lines, production equipment and junk have been removed from lease and well location.								
All metal bolts and other materials have been removed. Portable bases have been removed. (Poured onsite concrete bases do not have to be removed.)								
 All other environmental concerns have been addressed as per OCD rules. Pipelines and flow lines have been abandoned in accordance with 19.15.35.10 NMAC. All fluids have been removed from non-retrieved flow lines and pipelines. 								
When all work has been completed, re	eturn this form to the appropriate C	District office to sel	edule an inspection.					
signature ami	Goodwintitle. R	Regulatory Technic	ianDATE	7/10.				
TYPE OR PRINT NAME Jamie Goodwin E-MAIL Jamie L.Goowin@conocophillips.com PHONE: 505-326-9784 For State Use Only Image: Constant of the second								
APPROVED BY: / Multing TITLE District #3 DATE								
Conditions of Approval (if any):								

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