Form 3160-5 (February 2005)	UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT		RECEIVED)	FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007	
	DRY NOTICES AND REP			5. Lease Se NMSF07	8359	
	this form for proposals well. Use Form 3160-3 (J	APD) for such pro	PARA Ston Field	ffice	Allottee or Tribe Name	
	SUBMIT IN TRIPLICATE - Ot	her instructions on page	eau of Land Mana	97 Helmit o 132829	f CA/Agreement, Name and/or No.	
1. Type of Well						
Oil Well Gas Well Other				8. Well Name and No. NE CHACO COM #271H		
2. Name of Operator WPX Energy Production, LLC				9. API Well No. 30-039-31288		
3a. Address 3b. Phone No. (include area a						
PO Box 640 Aztec, NM 87410 505-333-1816				Chaco Unit NE HZ		
4. Location of Well <i>(Foota)</i> SHL: 1430' FSL & 353' FV BHL: 1576' FNL & 59' FV	San Carl	11. Country or Parish, State Rio Arriba, NM				
12. CH	ECK THE APPROPRIATE BOX	ES) TO INDICATE NAT	URE OF NOTICE, RE	PORT OR O	OTHER DATA	
TYPE OF SUBMISSIO	ON	Ales .	TYPE OF ACTION			
Notice of Intent	Acidize	Deepen	Start/Resur		Water Shut-Off	
	Alter Casing	Fracture Treat	Reclan	nation	Well Integrity	
Subsequent Report	Casing Repair	New Construction	Recom	plete	Other GAS DELIVERY	
	Change Plans	Plug and Abandon	Abandon	rarily		
Final Abandonment Not	ice Convert to Injection	Plug Back		Disposal		
all pertinent markers au subsequent reports mus recompletion in a new requirements, including	proposal is to deepen directionally ad zones. Attach the Bond under wh the filed within 30 days following interval, a Form 3160-4 must be fil g reclamation, have been completed vered on 7/16/15 @ 1445 hrs	hich the work will be perfored completion of the involve ed once testing has been or and the operator has deter	ormed or provide the B d operations. If the operation of	ond No. on f eration result onment Not	ile with BLM/BIA. Required s in a multiple completion or ces must be filed only after all	
Project Type: PERMA	NENT DELIVERY	DIV DIST 3				
Casing Pressure: 700	OILC	ONS. DIV DIST. 3	AC	CEPTED F	OR RECORD	
Tubing Pressure: 720		JUL 2 4 2015		JUL 2	0 2015	
Line Pressure: 373			FAR	/ /	The Strice	
	d to MDY			0		
Permanently connecte 14. I hereby certify that the fo						
Name (Printed/Typed) LACEY GRANILLO	D.C			IG TECH	11	
Signature	alcelto)		Date 7/17/15	e,	主要的 使得到是非	
V	THIS SPACE FO	OR FEDERAL OR	STATE OFFICE	USE		
Approved by	Ŧ		Title		Date	
Conditions of approval, if any, the applicant holds legal or equ applicant to conduct operation	hat					
	nd Title 43 U.S.C. Section 1212, makeus or fraudulent statements or repres			to make to ar	y department or agency of the	