Form 3160-5 (August 2007)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

RECEIVEFORM APPROVED
OMB No. 1004-0137 Expires: July 31, 2010

				Jicarilla 116			
SUN	IDRY NOTICES AND REP	PORTS ON WELLS		6. If Indian, Allottee or Tri	be Name		
Do not use this form for proposals to drill or to re-enter an				Farmington Field Office			
abandoned	well. Use Form 3160-3	(APD) for such prope	osals.	Bureau of Land Mana	icarilla Apach	е	
SL	IBMIT IN TRIPLICATE - Other in	structions on page 2.		7. If Unit of CA/Agreemen	t, Name and/or No.		
1. Type of Well							
Oil Well X Gas Well Other 2. Name of Operator ConocoPhillips Company				8. Well Name and No.	A		
				Tiger 1			
				9. API Well No.			
				30-039-20348			
3a. Address		3b. Phone No. (include are	ea code)	10. Field and Pool or Explo			
PO Box 4289, Farmington	(505) 326-9	700	Tapacito Pictured Cliffs				
4. Location of Well (Footage, Sec., T.,R	.,M., or Survey Description)			11. Country or Parish, State	e		
Surface Unit C (N	ENW), 790' FNL & 1450'	FWL, Sec. 21, T26N,	R3W	Rio Arriba	, New N	Nexico	
						Contract of	
12. CHECK T	THE APPROPRIATE BOX(ES	S) TO INDICATE NATU	RE OF NO	TICE, REPORT OR O	THER DATA		
TYPE OF SUBMISSION		TYF	PE OF AC	CTION		JUST PER DE	
				September 1	Water S	Lut Off	
X Notice of Intent	Acidize	Deepen		Production (Start/Resume)			
	Alter Casing	Fracture Treat		Reclamation	Well Int		
Subsequent Report	Casing Repair	New Construction		Recomplete	X Other	TA Status	
	Change Plans	Plug and Abandon	X	Temporarily Abandon		Extension	
Final Abandonment Notice	Convert to Injection	Plug Back		Water Disposal			
to review for future pote	u'd on 9/10/2013. Conoce ential.	ornilips requests p	emissio	n to extend the tem	porary abanc	ioned status	
	OIL CONS. DIV DI	ST. 3	BLM'S APPROVAL OR ACCEPTANCE OF THIS ACTION DOES NOT RELIEVE THE LESSEE AND				
	NOV 1 9 2015		OPERATOR FROM OBTAINING ANY OTHER				
	Acti			ORIZATION REQUIRED FOR OPERATIONS CDERAL AND INDIAN LANDS			
			ONFE	DERAL AND INDIAN E	ANDO		
TA approved	l until 12/1	/16				MA 12	
14. I hereby certify that the foregoing is	rue and correct. Name (Printed/Typ	ed)					
Dollie L. Busse		Title Staf	Title Staff Regulatory Technician				
Signature Alle	X Bus	e Date 110	1111	5	s Albert		
	THIS SPACE FO	R FEDERAL OR ST	ATE OFF	ICE USE			
Approved by					11		
Tantan	Art Constitution	Title P		Date 11	1/2/10		
Conditions of approval, if any, are attached			TO THE PERSON NAMED IN COLUMN TWO IS NOT THE PERSON NAMED IN COLUMN TWO IS NAMED IN		1	11-113	
that the applicant holds legal or equitable			Office FF	0			

entitle the applicant to conduct operations thereon.

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