

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTCONFIDENTIAL
TIGHT HOLEFORM APPROVED
OMB NO. 1004-0137
Expires July 31, 2010

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

SUBMIT IN TRIPLICATE - Other instructions on page 2

NOV 25 2015

1. Type of Well

☒ Oil Well ☐ Gas Well ☐ Other

2. Name of Operator

Energen Resources Corporation

3a. Address

2010 Afton Place, Farmington, NM 87401

3b. Phone No. (include area code)

(505) 325-6800

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

1281' FSL 1385' FWL, Sec 11 T27N R13W (N) SE/SW

382' FSL 255' FWL, Sec 10 T27N R13W (M) SW/SW

5. Lease Serial No.

NMSE077972

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Richardson Navajo 27-13-10
#4H

9. API Well No.

30-045-35242

10. Field and Pool, or Exploratory Area

Basin Mancos

11. County or Parish, State

San Juan NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☐ Notice of Intent
☒ Subsequent Report
☐ Final Abandonment Notice

TYPE OF ACTION

- | | | | |
|---|---|--|---|
| <input type="checkbox"/> Acidize | <input type="checkbox"/> Deepen | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off |
| <input type="checkbox"/> Alter Casing | <input type="checkbox"/> Fracture Treat | <input type="checkbox"/> Reclamation | <input type="checkbox"/> Well Integrity |
| <input type="checkbox"/> Casing Repair | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete | <input checked="" type="checkbox"/> Other <u>Pressure</u> |
| <input type="checkbox"/> Change Plans | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon | <u>test 4.5" Liner</u> |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back | <input type="checkbox"/> Water Disposal | |

BP

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

This sundry is in reference to the 3160-5/Set 4.5" Casing/dated 11/17/15. Upon further review of drilling documentation/reports it was discovered that the 4.5" pressure test took place during drilling operations as follows:

The 4.5", 11.6#, P-110 was pressure tested on 11/15/15 to 1500#, 15 minutes, good test. ✓

ACCEPTED FOR RECORD

OIL CONS. DIV DIST. 3

NOV 30 2015

JAN 08 2016

FARMINGTON FIELD OFFICE
BY: *[Signature]*14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Theresa McAndrews

Title Production Supervisor

Signature

[Signature]

Date 11/24/15

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Office

Title 18 U.S.C. Section 1001, and Title 43 U.S.C. Section 1212, makes 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.

NMOCD

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DEC 03 2015

ACCEPTED FOR RECORD

DEC 03 2015

FARMINGTON FIELD OFFICE

BY: William Tambekou14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)Theresa McAndrewsTitle Production Supervisor

Signature

Theresa McAndrewsDate 11/24/15

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