			RECEIV	ED				
Form 3160-5 (February 2005)	UNITED ST. DEPARTMENT OF T BUREAU OF LAND M	HE INTERIOR	NOV 09	2015	FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007			
CUM		ODTS ON WELLS	Farmington Fie	5. Lease S NMNM11				
Do not use	DRY NOTICES AND REI this form for proposals well. Use Form 3160-3 (6. If Indian, Allottee or Tribe Name 7. If Unit of CA/Agreement, Name and/or No.						
	SUBMIT IN TRIPLICATE - O							
1. Type of Well								
Oil Well Gas Well Other					8. Well Name and No. MC 5 COM #119H			
2. Name of Operator	110	9. API Well No.						
WPX Energy Production 3a, Address	, LLC	3b. Phone No. (include an	rea code)	30-045-35601 10. Field and Pool or Exploratory Area				
	c, NM 87410	505-333-1816	ca coucy	Basin me				
4. Location of Well (Foota) SHL:1290' FNL & 388' F BHL:332' FSL & 1294' F	iption)		11. Countr San Jua	y or Parish, State n, NM				
12. CH	ECK THE APPROPRIATE BOX	(ES) TO INDICATE NATU	RE OF NOTICE, R	EPORT OR	OTHER DATA			
TYPE OF SUBMISSIO	DN	T	PE OF ACTION					
Notice of Intent	Acidize	Deepen	Start/Res		Water Shut-Off			
	Alter Casing	Fracture Treat	Recla	mation	Well Integrity			
	Casing Repair	New Construction	Reco	mplete	Other GAS DELIVE	RY		
Subsequent Report	Change Plans	Plug and Abandon	Abandon	porarily				
Final Abandonment Not		Plug Back		r Disposal	No. of the second second			
duration thereof. If the all pertinent markers ar subsequent reports mus recompletion in a new requirements, including	ompleted Operation: Clearly state proposal is to deepen directionally ad zones. Attach the Bond under w st be filed within 30 days following interval, a Form 3160-4 must be fi g reclamation, have been complete (1/6/15 @ 1635 hrs. The initial flo	or recomplete horizontally, a hich the work will be perform g completion of the involved led once testing has been con d and the operator has determ	give subsurface loc ned or provide the operations. If the op upleted. Final Aban	ations and me Bond No. on peration result donment Not ready for fin	easured and true vertical depths of file with BLM/BIA. Required Its in a multiple completion or tices must be filed only after all nal inspection.) OIL CONS. DIV			
Project Type: PERMANENT	DELIVERY		100111201					
Casing Pressure: 600 Tubing Pressure: 360			NOV 1	0 2015	NOV 16 20	J15		
Line Pressure: 214				E				
Fluid Avg= 59 bph, 24hr Wt	80 psi, Csg Prsr= 600 psi, Sep Prsr= r= 127 bbls, 24hr Wtr Avg= 11 bph		ees F, Flow Line Ter	mp= 99 degre				
bbls, 24hr Fluid= 700 bbls 14. I hereby certify that the fo Name (Printed/Typed)	regoing is true and correct.							
LACEY GRANILIO			Date 11/9/15					
Approved by	UT ST AGET							
			Title		Date			
	are attached. Approval of this notic uitable title to those rights in the subj s thereon.		ıt					

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.

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	RECEIVED					
	UNITED STA DEPARTMENT OF TI UREAU OF LAND M	HE INTERIOR	NOV 09	2015	FORM APPROVED OMB No. 1004-0137 Expires: March 31, 2007	
SUNDRY	NOTICES AND REP	PORTS ON WELLS	Farmington F	5, Lease NMNM	Serial No. 119786	
Do not use this abandoned well.	an sals.	6. If Indian, Allottee or Tribe Name				
SUB	7. If Unit of CA/Agreement, Name and/or No.					
1. Type of Well		A1A/	NM134816			
Oil Well	8. Well Name and No. MC 5 COM #119H					
2. Name of Operator WPX Energy Production, LLC		9. API Well No. 30-045-35601				
3a. Address PO Box 640 Aztec, NM	87410	3b. Phone No. <i>(include area 505-333-1816)</i>	code)	10. Field and Pool or Exploratory Area Basin mc		
4. Location of Well (Footage, Sec SHL:1290' FNL & 388' FWL, s BHL:332' FSL & 1294' FWL, s	ec 33, T24N, R8W	ption)			ntry or Parish, State an, NM	
12. CHECK	THE APPROPRIATE BOX	(ES) TO INDICATE NATURE	OF NOTICE, RI	EPORT O	R OTHER DATA	
TYPE OF SUBMISSION		TYP	E OF ACTION	1		
Notice of Intent	Acidize	Deepen	Start/Resu	me)	Water Shut-Off	
	Alter Casing	Fracture Treat		mation		
Subsequent Report	Casing Repair	New Construction	Tempo		Other GAS DELIVERY	
Final Abandonment Notice	Change Plans	Plug and Abandon Plug Back	Abandon Water	Disposal	A Carton and the second	
requirements, including reclar The GAS was delivered on 11/6/1	mation, have been completed	and the operator has determine			otices must be filed only after all inspection.)	
Project Type: PERMANENT DELIVE	ERY	CONS. DIV DIST O	Termine State	n n n	5 5 6 5 5	
Casing Pressure: 600 Tubing Pressure: 360		No.		i [i]		
Line Pressure: 214		NOV 16 2015]	OV 1 0 2015	
				ip= 99 deg	rees F, Flow Rate= 1152 mcf/d, 24hr Avg= 48 bph, Total Oil Acoum= 13096	
14. I hereby certify that the foregoing	is true and correct.		1.11	And the second	AFMSS	
Name (Printed/Typed)		Title	PERMITTIN	NG TECH		
Signature	THIS SPACE FO	Date		USE		
Approved by	AULT AULT					
			Title	ACCEF	TED FOR RECORD	
Conditions of approval, if any, are att the applicant holds legal or equitable applicant to conduct operations there	Office	N	OV 10 0000			
Title 18 U.S.C. Section 1001 and Titl United States any false, fictitious or fi	e 43 U.S.C. Section 1212, mal	ce it a crime for any person knowi	ngly and willfully	to make to	any department or agency of the	
United States any faise, fictitious or fi	raudulent statements or repres	entations as to any matter within	Its jurisdiction AF	RMING	TON FIELD COST	
		NMOCD	C	P	OFFICE	
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