

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENTFORM APPROVED  
OMB NO. 1004-0135  
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.*5. Lease Serial No.  
NMSF080704

6. If Indian, Allottee or Tribe Name

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

**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other8. Well Name and No.  
STOREY B LS 82. Name of Operator  
BP AMERICA PRODUCTION COMPANY  
Contact: TOYA COLVIN  
E-Mail: Toya.Colvin@bp.com9. API Well No.  
30-045-119553a. Address  
737 NORTH ELDRIDGE PARKWAY 12.181A  
HOUSTON, TX 770793b. Phone No. (include area code)  
Ph: 281-366-714810. Field and Pool, or Exploratory  
AZTEC FRUITLAND SAND

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

Sec 11 T30N R11W SWSW 990FSL 990FWL  
36.822006 N Lat, 107.965729 W Lon11. County or Parish, and State  
SAN JUAN COUNTY, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION				
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off	
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity	
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other	
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Final Abandonment Notice	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal		

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 recompleat 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 recompleat 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 site is ready for final inspection.)

Subject well was P&amp;A'd 6/02/2014.

The location and lease road have been left to the landowner's satisfaction, therefore, BP requests Final Abandonment for the subject well. Please see the attached signed landowner letter.

CA NMA5

OIL CONS. DIV DIST. 3

MAR 14 2016

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #308927 verified by the BLM Well Information System  
For BP AMERICA PRODUCTION COMPANY, sent to the Farmington

Name (Printed/Typed) TOYA COLVIN

Title REGULATORY ANALYST

Signature (Electronic Submission)

Date 07/13/2015

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By

Title

ENVIRONMENTAL  
PROTECTION TEAM LEAD

MAR 08 2016

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, 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.

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

NMOCD

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