Form 3160-5 (August 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

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

|  |                          |                                  | 5. Lease Senai No.  | SF4977817                              |  |
|--|--------------------------|----------------------------------|---|--|--|
| SUNDRY NOTICES AND REPORTS ON WELLS                                  |                          |                                  | 6. If Indian, Allottee or Tribe   | Nameo 7                                |  |
| Do not use   | e this form for proposal |                                  | or of other   |  |  |
| abandoned  | well. Use Form 3160-3    | (APD) for such proposal          | s.  | San San                                |  |
| SUBMIT IN TRIPLICATE - Other instructions on page 2.                 |                          |                                  | 7. If Unit of CA/Agreement,   | Name and/or No. 4                      |  |
| 1. Type of Well  |                          |                                  | The Affection   |  |  |
| Oil Well   | X Gas Well Other         | भ                                | 8. Well Name and No.  | 8. Well Name and No.  Cooper 2R        |  |
| Name of Operator     Burling   | ton Resources Oil & Ga   | as Company LP                    | 9. API Well No. <b>30-</b>  | -045-30468                             |  |
| 3a. Address  |                          | 3b. Phone No. (include area code | e) 10. Field and Pool or Explora  | 10. Field and Pool or Exploratory Area |  |
| PO Box 4289, Farmington, NM 87499                                    |                          | (505) 326-9700                   | Fulcher F   | Fulcher Kutz Pictured Cliffs           |  |
| 4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) |                          |                                  | 11. Country or Parish, State  |  |  |
| Surface Unit M (S  | WSW), 1000' FSL & 865    | ' FWL, Sec. 7, T29N, R11\        | N San Juan  | , New Mexico                           |  |
| 12. CHECK 1  | THE APPROPRIATE BOX(E    | S) TO INDICATE NATURE C          | F NOTICE, REPORT OR OTH   | HER DATA                               |  |
| TYPE OF SUBMISSION   | TYPE OF ACTION           |                                  |   |  |  |
| X Notice of Intent   | Acidize                  | Deepen                           | Production (Start/Resume)   | Water Shut-Off                         |  |
| _  | Alter Casing             | Fracture Treat                   | Reclamation   | Well Integrity                         |  |
| Subsequent Report  | Casing Repair            | New Construction                 | Recomplete  | X Other TA Status                      |  |
| Bb   | Change Plans             | Plug and Abandon                 | X Temporarily Abandon   | Extension                              |  |
| Final Abandonment Notice   | Convert to Injection     | Plug Back                        | Water Disposal  |  |  |
| 13. Describe Proposed or Completed Op                                |                          |                                  |   |  |  |
|  |                          |                                  | d and true vertical depths of all pertine                                       |  |  |
|  |                          |                                  | Required subsequent reports must be a<br>pletion in a new interval, a Form 3160 |  |  |
|  |                          |                                  | ng reclamation, have been completed   |  |  |
| determined that the site is ready for                                |                          |                                  | ,   |  |  |
|  |                          |                                  |   |  |  |
|  |                          | gton Resources requests          | s permission to extend th   | e temporary abandoned                  |  |
| status to review for futu  | re potential.            |                                  |   |  |  |
|  |                          |                                  |   |  |  |
|  |                          |                                  |   |  |  |

OIL CONS. DIV DIST. 3

JUN 03 2016

| Extension Will expire 5/31/18  14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)  | 7   |
|---|---|
| Dollie L. Busse   | Title Regulatory Technician   |
| Signature Milie & Busse   | Date 5/26/16  |
| THIS SPACE FOR FEL  | DERAL OR STATE OFFICE USE   |
| Approved by  Abdelgadir Slmadani  | Title PE Date 5 /31/16  |
| Conditions of approval, if any, are attached. Approval of this notice does not warrant of that the applicant holds legal or equitable title to those rights in the subject lease which entitle the applicant to conduct operations thereon. | The State Control of the Control of |
| Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a crime for any false, fictitious or fraudulent statements or representations as to any matter within its ju   | person knowingly and willfully to make to any department or agency of the United States any urisdiction.  |
| (Instruction on page 2)   | DA  |