Submitted in lieu of Form 3160-5 (June 1990) RECEIVED **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT** SEP 2 7 2016 FORM APPROVED SUNDRY NOTICES AND REPORTS ON WELLS Budget Bureau No. 1004-0135 Farmington Field Office Do not use this form for proposals to drill or to deepen or reentry to a Expires: March 31, 1993 Bureau of Land Management different reservoir. Use "APPLICATION FOR PERMIT" - for such proposals. 5. Lease Number: 1. Type of Well: NM-03187 Gas 6. If Indian, allottee or Tribe Name: 2. Name of Operator: BURLINGTON RESOURCES OIL & GAS COMPANY LP 7. Unit Agreement Name: 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 8. Well Name and Number: LAMBE 1E (505) 326-9700 4. Location of Well, Footage, Sec. T, R, U: 9. API Well No. FOOTAGE: 1220' FSL & 1125' FWL 3004533881 T: 031N R: 010W U: M S: 21 10. Field and Pool: DK - BASIN::DAKOTA MV - BLANCO::MESAVERDE 11. County and State: SAN JUAN, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent Recompletion Change of Plans **New Construction** Subsequent Report Plugging Back **Final Abandonment** Casing Repair Non-Routine Fracturing Abandonment Altering Casing Water Shut Off X Other- Re-Delivery Conversion to Injection 13. Describe Proposed or Completed Operations This well was re-delivered on 9/2/2016 and produced natural gas and entrained hydrocarbons. THIS WELL WAS RECOMPLETED TO THE MESA VERDE & COMMINGLED WITH THE EXTISING DAKOTA Notes: OIL CONS. DIV DIST. 3 TP: 117 **CP: 167** Initial MCF: 2 OCT 0 3 2016 Meter No.: 86879 Gas Co.: **ENT** Proj Type.: RECOMPLETE 14. I Hereby certify that the foregoing is true and correct. Title: Staff Regulatory Tech. Date: 9/26/2016 CCEPTED FOR RECORD (This Space for Federal or State Office Use) SEP 28 2016 APPROVED BY: Title: Date:

NMOCD PY

CONDITION OF APPROVAL, if any: