5	RECEIVED			
Form 3160-5 (August 2007)	UNITED STATES DEPARTMENT OF THE INT BUREAU OF LAND MANAG	ERIOR EMENT	n Field Stätese Serial No.	FORM APPROVED OMB No. 1004-0137 Expires: July 31, 2010
		Bureau of La	nd Marapement	SF-078882
Do not us	DRY NOTICES AND REPORTS e this form for proposals to dri well. Use Form 3160-3 (APD)	ON WELLS	6. If Indian, Allottee	or Tribe Name
SU	JBMIT IN TRIPLICATE - Other instruction	ns on page 2.	7. If Unit of CA/Agr	eement, Name and/or No.
1. Type of Well				Canyon Largo Unit
Oil Well X Gas Well Other				o. Sanyon Largo Unit 415
2. Name of Operator Burlington Resources Oil & Gas Company LP			9. API Well No.	30-039-25379
3a. Address 3b. Phone No. (include area code)			de) 10. Field and Pool or	
PO Box 4289, Farmington, NM 87499 (505) 326-9700				Basin Dakota
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Surface Unit G (SWNE), 1795' FNL & 1625' FEL, Sec. 19, T25N, R6W Rio Ar				
12. CHECK	THE APPROPRIATE BOX(ES) TO I	NDICATE NATURE	OF NOTICE, REPORT C	OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF SUBMISSION TYPE OF ACTION			
X Notice of Intent	Acidize	Deepen	Production (Start/Resu	me) Water Shut-Off
	Alter Casing	racture Treat	Reclamation	Well Integrity
Subsequent Report	Casing Repair	New Construction	Recomplete	X Other TA Status
-	Change Plans	lug and Abandon	X Temporarily Abandon	Extension
Final Abandonment Notice	Convert to Injection P peration: Clearly state all pertinent details, inc	lug Back	Water Disposal	
The subject well was Ta status to review for fut			SEE ATTACHE	FOR
	CONS. DIV DIST.	co	NDITIONS OF A	PPROVAL
	OILCONO			
Extension approv	OIL CONS. DIV DIST. 9 NOV 0 9 2016	7		
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Typed)	De la		
Signature Alles Russe			tory Technician	
	THIS SPACE FOR FE	DERAL OR STAT	E OFFICE USE	
Approved by AG SImada	n;	Tit	e PE	Date 11/4/14
	hed. Approval of this notice does not warrant the title to those rights in the subject lease which as thereon.		fice	,
	3 U.S.C. Section 1212, make it a crime for an		willfully to make to any departs	ment or agency of the United States any
	or representations as to any matter within its j			
(Instruction on page 2)		NMOCD F	V	2

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## **BLM CONDITION OF APPROVAL**

1. MIT is required for the subject well; MIT is due 5/14/2017.

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2. Contact this office at (505) 564-7750 prior to conducting any operations.