			RECEIVED		
Form 3160-5 (June 2015)	UNITED STAT DEPARTMENT OF THE	INTERIOR	SEP 1 5 2017	OM Expire	RM APPROVED IB No. 1004-0137 es: January 31, 2018
	BUREAU OF LAND MAN		- minston Field O	5. Lease Serial No.	
Do not us	NDRY NOTICES AND REP se this form for proposals d well. Use Form 3160-3 (A	to arill or to re	e-enter an	geonEndian, Allottee or T	ribe Name
SUBMIT IN TRIPLICATE - Other instructions on page 2				7. If Unit of CA/Agreem NMNM 136328X	ent, Name and/or No.
1. Type of Well ⊠Oil Well	Gas Well Other	as Well Other OIL CONS. DIV DIST. 3		8. Well Name and No. Rodeo Unit 501H	
2. Name of Operator		SEP 2 0 2017		9. API Well No.	
WPX Energy Production, LLC 3a. Address PO Box 640 Aztec, NM		3b. Phone No. (include area code)		30-045-35800   10. Field and Pool or Exploratory Area   Basin Mancos	
4. Location of Well (Footage SHL: 282' FSL & 427' FE BHL: 963' FNL & 336' FE		)		11. Country or Parish, Sta San Juan, NM	ate
	12. CHECK THE APPROPRIATE I	BOX(ES) TO INDIC	ATE NATURE OF NOT	TICE, REPORT OR OTHER	R DATA
TYPE OF SUBMISSI	ON		TYPE OF AC	TION	
Notice of Intent	Acidize	Deepen	Pro	oduction (Start/Resume)	Water ShutOff
	Alter Casing	Hydraulic Fra	acturing Re	clamation	Well Integrity
Subsequent Report	Casing Repair	New Constr		complete	Other Flare for reserve
Final Abandonment Notice		Plug and Ab	untern	emporarily Abandon	recovery operations
	Convert to Injection	Plug Back		ater Disposal	
			ACHED FOR		
the proposal is to deepen the Bond under which th completion of the involv	mpleted Operation: Clearly state all pe directionally or recomplete horizontal e work will be perfonned or provide the ed operations. If the operation results nment Notices must be filed only after	rtinent details, includ ly, give subsurface lo ne Bond No. on file v in a multiple comple	ocations and measured a with BLM/BIA. Require tion or recompletion in a	ate of any proposed work ar nd true vertical depths of all d subsequent reports must b a new interval, a Form 3160	pertinent markers and zones. Atta- be filed within 30 days following 0-4 must be filed once testing has b
WPX Energy re the W Lybrook	equests authorization to fla Unit #749H.	re the <u>Rodeo U</u>	l <mark>nit #501H_</mark> for 7 (	days starting <u>9/17/1</u>	. <u>7</u> due to a work over job
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)					
Lacey Granillo			le: Permit Tech III		
	Signature				
Signature	(the)	Da	te: 9/15/17		
Signature	THE SPACE		AL OR STATE O	FICE USE	
Signature Approved by	THE SPACE			FICE USE	
Approved by AG E	madani	E FOR FEDER		FICE USE	9/18/17
Approved by AGE Conditions of approval, if any certify that the applicant hold	THE SPAC mada , are attached. Approval of this notice s legal or equitable title to those rights ant to conduct operations thereon.	E FOR FEDER	AL OR STATE O		a 9/18/17
Approved by AG ET Conditions of approval, if any certify that the applicant hold which would entitle the applic Fitle 18 U.S.C Section 1001 a	, are attached. Approval of this notice s legal or equitable title to those rights	does not warrant or in the subject lease it a crime for any per	AL OR STATE O	Date F=+	
Approved by AG ET Conditions of approval, if any certify that the applicant hold which would entitle the applic Fitle 18 U.S.C Section 1001 a	, are attached. Approval of this notice s legal or equitable title to those rights ant to conduct operations thereon. and Title 43 U.S.C Section 1212, make	does not warrant or in the subject lease it a crime for any per	AL OR STATE O	Date F=+	

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## United States Department of the Interior

BUREAU OF LAND MANAGEMENT Farmington District Office 6251 College Blvd. - Suite A Farmington, New Mexico 87402 www.blm.gov/nm



In Reply refer To:

## **Conditions of Approval**

- Flaring is authorized pursuant to 43 CFR 3170, Subpart 3179.102.
- 43 CFR 3179.9 (a) The operator must estimate or measure all volumes of gas vented or flared from wells, facilities and equipment on a lease, unit PA, or communitized area and report those volumes under applicable ONRR reporting requirements.
- If additional time is required, please contact this office accordingly.
- Please take appropriate and necessary safety precautions at this well site during the flaring period.