

Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

OIL CONS. DIV DIST. 3

OCT 10 2017

RECEIVED

OCT 04 2017

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

Farmington Field Office  
Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

HILCORP ENERGY COMPANY

3. Address and Phone No. of Operator:

P.O. Box 4700 Farmington, NM 87499

505-599-3400

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 1860' FSL & 1160' FEL

S: 09 T: 029N R: 007W U: I

5. Lease Number:

NMSF-078399

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 29-7 UNIT 172

9. API Well No.

3003926746

10. Field and Pool:

PC - BLANCO::PICTURED CLIFFS

11. County and State:

RIO ARRIBA, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
	<input checked="" type="checkbox"/> Other- Re-Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 10/2/2017 and produced natural gas and entrained hydrocarbons.

Notes: WELL WAS SHUT IN FOR MORE THAN 90 DAYS DUE TO DOWN HOLE ISSUES . RETURNED TO PRODUCTION 10/2/2017.

ACCEPTED FOR RECORD

OCT 05 2017

FARMINGTON FIELD OFFICE  
BY: William Tambekou

TP: 221

CP: 221

Initial MCF: 48

Meter No.: 98435

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed

*Christine Brock*  
Christine Brock

Title: Operations/Regulatory Tech - Sr.

Date: 10/4/2017

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

Date:

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes 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.

NMOCD