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Form 3160-5 (August 2007)

## UNITED STATES DEPARTMENT OF THE INTERIOR BURGALLOG LAND MANAGEMENT

DEC 0 1 2017

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

| BUREAU OF LAND MANAGEMENT  |  |                 |  | NT Expires: July 31, 2010 |                                    |   |  |
|--|--|-----------------|--|---------------------------|------------------------------------|---|--|
| Farmin0  |  |                 |  |                           | ngton Field Office                 | 5. Lease Serial No.<br>Ion Field Office                         |  |
| SUNDRY NOTICES AND REPORTS ON WELLS Bureau of I                      |  |                 |  |                           | and Management 14-20-603-771       |   |  |
|  | e this form for propos   |                 |  |                           |                                    |   |  |
| abandoned well. Use Form 3160-3 (APD) for such proposals.            |  |                 |  |                           | Navajo Tribe                       |   |  |
| SUBMIT IN TRIPLICATE - Other instructions on page 2.                 |  |                 |  |                           | 7. If Unit of CA/Agreement, N      | 7. If Unit of CA/Agreement, Name and/or No.                     |  |
| 1. Type of Well Oil Well X Gas Well Other                            |  |                 |  |                           |                                    |   |  |
| Oil Well   | 8. Well Name and No.  Kah Des Pah 1R   |                 |  |                           |                                    |   |  |
| 2. Name of Operator  |  | 9. API Well No. |  |                           |                                    |   |  |
|  | N ( 1 1  | 1.              | 30-045-20763   |                           |                                    |   |  |
| 3a. Address PO Box 4700, Farmington, NM 87499                        |  |                 | ne No. (include area c<br>505-599-3400   |                           |                                    | 10. Field and Pool or Exploratory Area  Ballard Pictured Cliffs |  |
| 4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) |  |                 |  |                           | 11. Country or Parish, State       |   |  |
|  | WSW), 1850' FSL & 25   | 0' FWL, Se      | c. 18, T26N, R   | W80                       | San Juan                           | , New Mexico  |  |
| 12 CHECK   | THE APPROPRIATE BOX  | (ES) TO INF     | DICATE NATURE  | OFN                       | IOTICE REPORT OR OTH               | IFR DATA  |  |
|  | 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT  SUBMISSION  TYPE OF ACTION |                 |  |                           |                                    | TEN DATA  |  |
| TYPE OF SUBMISSION   |  |                 |  |                           |                                    |   |  |
| Notice of Intent   | Acidize  | Dee             |  | L                         | Production (Start/Resume)          | Water Shut-Off  |  |
| -  | Alter Casing   |                 | cture Treat  | _                         | Reclamation                        | Well Integrity  |  |
| X Subsequent Report  | Casing Repair  | Nev             | v Construction   |                           | Recomplete                         | X Other Shut-in   |  |
|  | Change Plans   |                 | g and Abandon  |                           | Temporarily Abandon                | Production Verification   |  |
| Final Abandonment Notice  13. Describe Proposed or Completed O       | Convert to Injection   |                 | g Back   |                           | Water Disposal                     |   |  |
| A production verificati TP: 32 CP: 32                                | on was performed on  | the subjec      | t well on 11/27  | /2017                     | . Please extend the Sh             | ut In status.   |  |
| Meter No.: 87244   | Meter No.: 87244 Gas Co.: ENT OIL  |                 | MS. DIV DIST. 3 BLM'S APPROVAL OR ACCEPTANCE OF THIS   |                           |                                    |   |  |
| Project Type: Production Verification                                |  | DE              | C 0 8 2017 ACTION DOES NOT RELIEVE THE LESSEE AND OPERATOR FROM OBTAINING ANY OTHER AUTHORIZATION REQUIRED FOR OPERATION |                           |                                    | NING ANY OTHER  |  |
|  |  |                 |  | (                         | ON FEDERAL AND INDIAN              | N LANDS   |  |
|  |  |                 |  |                           |                                    |   |  |
| SI status ap   | wroved until   | 1/1/            | 2019   |                           |                                    |   |  |
| 14. I hereby certify that the foregoing is                           | true and correct. Name (Printed  | VTyped)         |  |                           |                                    |   |  |
| Christine Brock  |  |                 | Title Operations/Regulatory Technician   |                           |                                    |   |  |
| Signature Service Brock  |  |                 | Date (2/1/17)  |                           |                                    |   |  |
|  | THIS SPACE   | FOR FEDI        | ERAL OR STAT   | TE OF                     | FFICE USE                          |   |  |
| Approved by  |  |                 |  |                           | `                                  |   |  |
| Conditions of approval, if any, are attact                           |  | itle <b>Te</b>  | holeum Enginee   | r Date 12/4/2017          |                                    |   |  |
| that the applicant holds legal or equitabl                           | e title to those rights in the subject   |                 |  | ffice                     | FED                                |   |  |
| entitle the applicant to conduct operation                           |  |                 |  | /                         | 10                                 |   |  |
| Title 18 U.S.C. Section 1001 and Title 4                             | 3 U.S.C. Section 1212, make it a   | crime for any p | erson knowingly and  | willful                   | ly to make to any department or ag | ency of the United States any                                   |  |

false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.