Form 3160-5

(Instruction-on-page 2)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANY

FORM APPROVED

(August 2007)	BUREAU OF LAND MA	NAGEMENT	EB 27	Expires 5 Lease Social No	No. 1004-0137	
		7 20 20 20 20 20 20 20 20 20 20 20 20 20	-2	eld Omemen	SF-078266	
Do not us	NDRY NOTICES AND REP se this form for proposals	ORTS ON WELLS to drill or to re-er	Hernington	6.18 Indian, Allottee or Tribe	Name	
abandoned	well. Use Form 3160-3 (A	APD) for such pro	posals.			
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to re-entering and abandoned well. Use Form 3160-3 (APD) for such proposals. SUBMIT IN TRIPLICATE - Other instructions on page 2.				7: If Unit of CA/Agreement, Name and/or No.		
1. 1) po or (101	Type of Hell					
Oil Well X Gas Well Other				8. Well Name and No. San Jacinto 6E		
2. Name of Operator				9. API Well No.		
Hilcorp Energy Company 3a. Address 3b. Phone No. (include a				30-045-24057 de) 10. Field and Pool or Exploratory Area		
PO Box 4700, Farmington, NM 87499		505-599-		Basin Dakota / Blanco MV		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description) Surface——Unit-A-(NENE)_1090'FNL-&-640'FEL,-Sec			-R10W	11. Country or Parish, State San-Juan	, New-Mexico	
12. CHECK	THE APPROPRIATE BOX(ES	TO INDICATE NAT	URE OF NO	TICE, REPORT OR OTH	IER DATA	
TYPE-OF-SUBMISSION-			YPE-OF-AC	TIONNOIT		
Notice of Intent	Acidize	Deepen	I	Production (Start/Resume)	Water Shut-Off	
	Alter Casing	Fracture Treat	F	Reclamation	Well Integrity	
X Subsequent Report	Casing Repair	New Construction		Recomplete	X Other	
Final Abandonment Notice	Change Plans Convert to Injection	Plug and Abandon Plug Back		Temporarily Abandon Water Disposal	Record Clean Up	
13. Describe Proposed or Completed Op					cote duration thereof	
Hilcorp used a closed l	oop system during the red	complete operatio				
		ACCEPTED FOR RECORD				
MAR 0 8 2018			MAR 0 1 2018			
ACCEPTED FOR HEDORD			FARMINGTON FIELD OFFICE,			
ACCEPTED FOR						
14. I hereby certify that the foregoing is	true and correct. Name (Printed/Type	d)				
Christine-Brock			Title—Operations/Regulatory-Technician—Sr.			
Signature Christine Leck Date			2/27/2018			
	THIS SPACE FO	R FEDERAL OR S	STATE OFF	ICE USE		
Approved by						
			Title			
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.			Office			
Title 18 U.S.C. Section 1001 and Title 4. false, fictitious or fraudulent statements of			y and willfully t	o make to any department or ag	ency of the United States any	