

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 re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.*FORM APPROVED  
OMB NO. 1004-0137  
Expires: January 31, 2018

<b>SUBMIT IN TRIPLICATE - Other instructions on page 2</b>		5. Lease Serial No. NMSF078460
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		6. If Indian, Allottee or Tribe Name
2. Name of Operator HILCORP ENERGY COMPANY		7. If Unit or CA/Agreement, Name and/or No.
Contact: AMANDA WALKER E-Mail: mwalker@hilcorp.com		8. Well Name and No. SAN JUAN 32-7 UNIT 60
3a. Address 1111 TRAVIS ST. HOUSTON, TX 77002	3b. Phone No. (include area code) Ph: 505-324-5122	9. API Well No. 30-045-23688
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 20 T32N R07W Mer NMP NENE 900FNL 830FEL		10. Field and Pool or Exploratory Area BLANCO MV / BASIN DK
		11. County or Parish, State SAN JUAN COUNTY, NM

## 12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input checked="" type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.

This well was returned to production on 7/22/2019 following a Recompletion project. This well is now producing as a Blanco Mesaverde / Basin Dakota under DHC 3962AZ.

NMOC

AUG 14 2019

DISTRICT III

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #477226 verified by the BLM Well Information System For HILCORP ENERGY COMPANY, sent to the Farmington Committed to AFMSS for processing by MELISSA REEVES-WIENTJES on 08/09/2019 ()</b>	
Name (Printed/Typed) AMANDA WALKER	Title OPERATIONS REGULATORY TECH
Signature (Electronic Submission)	Date 08/08/2019

ACCEPTED FOR RECORD

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____	Title _____	AUG 09 2019 Date
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 _____	FARMINGTON FIELD OFFICE BY: <i>hw</i>

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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 or representations as to any matter within its jurisdiction.

(Instructions on page 2)

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*

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