

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0137
Expires: January 31, 2018**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.*5. Lease Serial No.
NMSF077922

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

SUBMIT IN TRIPLICATE - Other instructions on page 2

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other8. Well Name and No.
HUDSON 22. Name of Operator
HILCORP ENERGY COMPANYContact: KANDIS ROLAND
E-Mail: kroland@hilcorp.com9. API Well No.
30-045-08950-00-S13a. Address
1111 TRAVIS STREET
HOUSTON, TX 770023b. Phone No. (include area code)
Ph: 505.324.514910. Field and Pool or Exploratory Area
BASIN FRUITLAND COAL

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Sec 34 T30N R12W SESE 0990FSL 0330FEL
36.764560 N Lat, 108.077270 W Lon

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 type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	Final Abandonment Notice
	<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 recompleat 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.

Hilcorp Energy Company plugged and abandoned the subject well on 9/26/2008. Reclamation was completed and the location is now ready for final closure approval. See attached surface owner letter that was sent 12/6/2019. Please remove this well from Hilcorp Energy Company bond.

NMOC

FEB 06 2020

DISTRICT III

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

Electronic Submission #501093 verified by the BLM Well Information System

For HILCORP ENERGY COMPANY, sent to the Farmington

Committed to AFMSS for processing by ALBERTA WETHINGTON on 01/31/2020 (20AMW0158SE)

Name (Printed/Typed) KANDIS ROLAND

Title REGULATORY SPECIALIST

Signature (Electronic Submission)

Date 01/28/2020

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By SARAH SCOTT

Title SUPERVISORY NATURAL RESOURCE SPECIALIST Date 02/04/2019

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

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)

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **



Hilcorp San Juan, L.P.
Land Tech – San Juan
Lisabeth Jones
382 Road 3100
Aztec, NM 87410
Telephone: (505) 324-5129
ljones@hilcorp.com

VIA CERTIFIED MAIL – RETURN RECEIPT REQUESTED
9214 7969 0099 9790 1014 9728 40

December 6, 2019

John Scott Trust
1110 W Aztec Blvd Unit 4
Aztec, NM 87410

Subject: Final Reclamation Approval
HUDSON 2
Section 34, T30N, R12W
San Juan County, New Mexico

Dear Landowner:

Hilcorp San Juan, L.P. is hereby notifying you of the completed final reclamation to the above referenced well.

Enclosed for your review and approval, please find Final Reclamation Detail and Approval form and return in self-addressed envelope, or notify us within five (5) days of receiving this letter. If we do not hear from you within the designated five (5) day time frame, we will consider this your approval to proceed.

If you have any questions regarding this matter, please call me at (505)324-5129.

Sincerely,

Lisa Jones
Land Tech

2. Article Number 9214 7969 0099 9790 1014 9728 40		COMPLETE THIS SECTION ON DELIVERY	
1. Article Addressed to: John Scott Trust 1110 W Aztec Blvd Unit 4 Aztec, NM 87410  9290 9969 0099 9714 9728 51		A. Signature X <i>John Scott</i>	<input type="checkbox"/> Agent <input type="checkbox"/> Addressee
		B. Received by (Printed Name) <i>John Scott</i>	C. Date of Delivery <i>12-11-19</i>
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	
Code: FAN - 12/5/2019 - B.M. Code2: Hudson 2 - Sec 34, T30N, R12W			
PS Form 3811		Domestic Return Receipt	

U.S. Postal Service™ CERTIFIED MAIL™ RECEIPT (Domestic Mail Only; No Insurance Coverage Provided) For delivery information visit our website at www.usps.com	
9214 7969 0099 9790 1014 9728 40	
Postage	\$ 0.500
Certified Fee	\$3.50
Return Receipt Fee (Endorsement Required)	\$2.80
Restricted Delivery Fee (Endorsement Required)	\$0.00
Total Postage & Fees	\$ 6.800
Postmark Here	
Sent To John Scott Trust 1110 W Aztec Blvd Unit 4 Street, Apt. No., or PO Box No. Aztec, NM 87410 City, State, Zip+4	
PS Form 3811, August 2006 See Reverse for Instructions	

Code: FAN - 12/5/2019 - B.M.
Code2: Hudson 2 - Sec 34, T30N, R12W