

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires November 30, 2000

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.*

SUBMIT IN TRIPLICATE – Other instructions on reverse side

RECEIVED

DEC 03 2007

Bureau of Land Management
Farmington Field Office

RCVD DEC 5 '07
OIL CONS. DIV.

DIST. 3

1 Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	2 Name of Operator BP America Production Company Attn: Toya Colvin	3a Address P.O. Box 3092 Houston, TX 77253	3b Phone No. (include area code) 281-366-7148	5 Lease Serial No NM 03566	6 If Indian, Allottee or tribe Name	7 If Unit or CA/Agreement, Name and/or No	8 Well Name and No Stewart LS 8N	9 API Well No 30-045-34040
3a Address P.O. Box 3092 Houston, TX 77253				10 Field and Pool, or Exploratory Area Basin Dakota & Blanco Mesaverde		11 County or Parish, State San Juan, NM		
4 Location of Well (Footage, Sec., T., R., M., or Survey Description) 2610' FSL 995' FWL Sec 28 T30N R10W				12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OR NOTICE, REPORT, OR OTHER DATA				

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

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 recompleate 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 shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.

BP America submitted APD on 10/24/06. Approval was granted 12/18/06 and expires 12/18/07.

BP requests a 2 year Extension to the APD.

This extension will expire 12/18/09.

14 I hereby certify that the foregoing is true and correct Name (Printed/typed) Toya Colvin	Title Regulatory Analyst
Signature <i>Toya Colvin</i>	Date 11/28/07

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by <i>Cynthia Marquez</i>	Title <i>ZJE</i>	Date <i>12/3/07</i>
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 <i>FFO</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.

Current NMOCD rules and regulations must be met at time of drilling

NMOCD *18*