

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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NOV 8 2008

FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

## SUNDRY NOTICES AND REPORTS ON WELLS and Management

Do not use this form for proposals to drill or to ~~re-enter~~ <sup>re-enter</sup> an abandoned well. Use Form 3160-3 (APD) for such proposals.

## SUBMIT IN TRIPLICATE- Other instructions on reverse side.

1. Type of Well  
☐ Oil Well ☒ Gas Well ☐ Other2. Name of Operator  
ROSETTA RESOURCES OPERATING LP3a. Address  
1200 17th ST., SUITE 770, DENVER, CO 802023b. Phone No. (include area code)  
720 359-91444. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
1495' FSL & 1965' FWL 18-25N-13W NMPM

5. Lease Serial No.

NMNM-114380

6. If Indian, Allottee or Tribe Name

N/A

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

N/A

8. Well Name and No.

WEST BISTI 18 #3

9. API Well No.

30-045- 34659

10. Field and Pool, or Exploratory Area

BASIN FRUITLAND COAL GAS

11. County or Parish, State

SAN JUAN COUNTY, NM

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

## TYPE OF SUBMISSION

- ☒
- Notice of Intent
- 
- ☐
- Subsequent Report
- 
- ☐
- Final Abandonment Notice

## TYPE OF ACTION

- |                                                  |                                           |                                                    |                                                      |
|--------------------------------------------------|-------------------------------------------|----------------------------------------------------|------------------------------------------------------|
| <input type="checkbox"/> Acidize                 | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off              |
| <input type="checkbox"/> Alter Casing            | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity              |
| <input type="checkbox"/> Casing Repair           | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input checked="" type="checkbox"/> Other CHANGE BOP |
| <input checked="" 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 shall 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 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.)

CHANGE BOP

RCVD NOV 9 '09  
OIL CONS. DIV.  
DIST. 3

cc: BLM, Campbell

14. I hereby certify that the foregoing is true and correct
- 
- Name (Printed/Typed)

BRIAN WOOD

(PHONE 505 466-8120)

Title CONSULTANT

(FAX 505 466-9682)

Signature

Date

04/12/2008

## THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Date

Office

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)

NMOCD

Install the TIW valve to the bottom of the Kelly. Install the test truck to the TIW Valve. With the TIW valve closed, pressure test the TIW valve to 250 psig low and 1,000 psig high for 10 minutes. Open and the TIW valve and close the upper Kelly cock. Pressure test the Kelly and upper Kelly cock to 250 psig low and 1,000 psig high. Hold each pressure for 10 minutes with 0% drop during the test.

**2 1/2" BLOWOUT PREVENTER SYSTEM**  
Annular preventer operates as a pipe ram and/or as a blind ram. All port valves are 2 inch.

**Screw type (Threaded, not flanged) BOP may be used**

**A. NOTE: Upper Kelly cock valve with handle will be used.  
B. Safety valve and subs to fit all drill string connections will be available.**

**High-Pressure, threaded flexible inlet and outlet lines will be used.**

8" Flow Line

2" Fill Line

RAM

RAM

DRILLING FLANGE

2" Valve

2" Valve

2" Line

To Choke Assembly

2" Kill Line

7" 2000 # CSG HEAD

Gauge

From Preventer

Adjustable Choke

2" Valves

2" Valve

Adjustable Choke

2" Lines To Mud Pit Properly Anchored