

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.*

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

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. TRIGG FEDERAL GAS COM 1M
2. Name of Operator BP AMERICA PRODUCTION CO		9. API Well No. 30-045-3020-00-X1
3a. Address P. O. BOX 3092 HOUSTON, TX 77253	3b. Phone No. (include area code) Ph: 281.366.4491 Fx: 281.366.0700	10. Field and Basin, or Exploratory BASIN DAKOTA
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T29N R9W SESW Lot 14 1140FSL 2420FWL 36.43300 N Lat, 107.46000 W Lon		11. County or Parish, and State SAN JUAN COUNTY, NM

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

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"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<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 checked="" 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 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 new 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.)

Application for Permit to Drill for the subject well was submitted on 04/02/2001 and approved by your office on 06/21/2001. Amendments to our drilling and completion Program were submitted on 06/19/2001 and approved on 01/03/2001. We respectfully request an extension to the drilling permit to allow for the drilling of the subject well.

*This approval expires 6-14-03*

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

**Electronic Submission #11581 verified by the BLM Well Information System  
For BP AMERICA PRODUCTION CO, sent to the Farmington  
Committed to AFMSS for processing by Matthew Warren on 06/17/2002 (02MXW04339)**

Name (Printed/Typed) **MARY CORLEY**

Title **AUTHORIZED REPRESENTATIVE**

Signature (Electronic Submission)

Date **05/29/2002**

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved By **MATTHEW WARREN**

Title **PETROLEUM ENGINEER**

Date **06/17/2002**

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.

**\*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\* REVISED \*\***

**NMOCD**

