

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

| | | |
|---|---|---|
| 1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 8. Well Name and No. GALLEGOS CANYON UNIT 44 |
| 2. Name of Operator BP AMERICA PRODUCTION COMPANY | | 9. API Well No. 30-045-07610 |
| 3a. Address P.O. BOX 3092 HOUSTON, TX 77253 | 3b. Phone No. (include area code) Ph: 281.366.4081 Fx: 281.366.0700 | 10. Field and Pool, or Exploratory BASIN FRUITLAND COAL <i>W. Kentz p</i> |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 35 T29N R13W SWSW 668F ML 668F FL <i>5 W</i> | | 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 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 checked="" 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 type="checkbox"/> Other | |
| | <input type="checkbox"/> Change Plans | <input checked="" 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 recomplete 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 recompletion 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.)

12/17/01 RU Unit. Blw DN well. NDWH & NUBOP. RU floor & tbq equip. Pull slips & SIFN.
12/18/01 Blw DN well & TOH w/tbg. TIH w/CIBP - BP stopped at 360'. Try pmping around & pull BP -
No luck at try to ret BP - shear off BP & set. TOH w/setting tool & tbg. SDFN.
12/19/01 Blw DN well. TIH w/mill, DC & tbg. Mill out CIBP. Chase to btm. Tagged @ 1470' & RU
swival & got CIBP DN to 1500'. Unable to get any deeper. Talked w/Kevin Schmieder W/BLM & got
verbal to set CMT Ret above CIBP & CMT. TOH w/tbg & prep to LD drill collars. SDFN.
12/20/01 TIH W/CMT retainer & set @ 1500'. RU & pmp 3.5 bbls cmt below ret. Sting out & pmp 7.5
bbls cmt above ret. TOH LD Tbg. RU WL & shoot 4 sqz holes @ 425'. RU & circ around backside. Pmp
35 bbls DN CSG & circ to surface on backside. Wait 10 min. & cmt did not fall. RD Dowell. RD
floor & BOP. RU to cut off wellhead. SDFN.
12/21/01 Cut off WH & install dry hole marker. RD Unit & Rel Rig.

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| 14. I hereby certify that the foregoing is true and correct. Electronic Submission #9940 verified by the BLM Well Information System For BP AMERICA PRODUCTION COMPANY, sent to the Farmington | |
| Name (Printed/Typed) CHERRY HLAVA <i>Cherry Hlava</i> | Title AUTHORIZED REPRESENTATIVE |
| Signature (Electronic Submission) | Date 01/04/2002 |

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

| | | |
|---|---------------------------------|------------|
| <u>Approved By</u> _____ 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 _____ Office _____ | Date _____ |
|---|---------------------------------|------------|

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.

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