

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**

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. <b>NM - 048573</b>
2. Name of Operator <b>BP America Production Company Attn: Mary Corley</b>		6. If Indian, Allottee or tribe Name
3a. Address <b>P.O. Box 3092 Houston, TX 77253</b>		7. Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) <b>281-366-4491</b>		8. Well Name and No. <b>Marsrow Gas Com 1E</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>1770' FSL &amp; 1100' FWL Sec 15 T29N R12W</b>		9. API Well No. <b>30-045-24007</b>
		10. Field and Pool, or Exploratory Area <b>Basin Dakota &amp; Otero Chacra</b>
		11. County or Parish, State <b>San Juan County, New Mexico</b>

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OR 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"/> Abandon
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Water Disposal	
	<input type="checkbox"/> Injection	<input type="checkbox"/> Plug Back	<input checked="" type="checkbox"/> Other	<b>Cancel Prior Well Work Request</b>

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.

On Mat 31, 2002, BP submitted a Sundry NOI requesting permission to complete into the Chacra and Downhole commingle production with the Dakota. At the present time BP no longer intends to perform the recompleat and DHC for the subject well, therefore, we request that the application for the proposed action be cancelled.

ACCEPTED FOR RECORD

APR 22 2005

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RECEIVED  
070 FARMINGTON NM

14. I hereby certify that the foregoing is true and correct		FARMINGTON FIELD OFFICE	
Name (Printed/typed) <b>Mary Corley</b>	Title <b>Senior Regulatory Analyst</b>		
Signature <i>Mary Corley</i>	Date <b>04-05-2005</b>		

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

Approved by _____	Title _____	Date _____
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 _____		

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.

NMOCDD