Form 3160-5 (February 2005)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

TORM APPROVED
OM B No. 1004-0137
Expires: March 31, 200

SUNDRY NOTICES AND REPORTS ON WELLS				NmSF0	80244	
Do not use th	is form for proposals to ell. Use Form 3160-3 (A	dillison Atta	ePaliteriaii 11 1	6. If Indian, Allottee or Tri	be Name	
SUBMIT IN TRI	7. If Unit or CA/Agreemen	at, Name and/or No.				
SUBMIT IN TRIPLICATE- Other instructions on reverse side.				NMNMT	13113 ·	
Oil Well Gas Well Other				8. Well Name and No.	A#2	
2. Name of Operator BP america Production (o  3a Address 200 fineral (4) 3b. Phone No. (include area code)				9. API Well No.	<u> </u>	
3a Address 200 Energy	30 - 045 - 10. Field and Pool, or Explo					
Farming ton, NM 87402 918-925-7069  4. Location of Well (Foolage, Sec., T., R., M., or Survey Description)				Basin Fru		
SE/SE Se	11. County or Parish, State San Juan	A 1				
12. CHECK AP	PROPRIATE BOX(ES) TO I	NDICATE NAT	URE OF NOTICE, RE	EPORT, OR OTHER DA		
TYPE OF SUBMISSION	TYPE OF ACTION					
П	Acidize	Deepen	Production (Star	· ,	<b>41</b> 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
☐ Notice of Intent	☐ Alter Casing ☐ Casing Repair ☐	Fracture Treat	Reclamation  Recomplete	Well Integ	pity 43 4 5 7 (4)	
Subsequent Report	Change Plans	New Construction Plug and Abando	undon	SEP		
Final Abandonment Notice  13. Describe Proposed or Complete	Convert to Injection	Plug Back	Water Disposal		3 Om Pie 2005	
Attach the Bond under which the following completion of the investesting has been completed. Find determined that the site is ready Subject well Production  Basin Fruit	(first deliver estimated Hand Coal I g 1, 2005.	e the Bond No. on fi sults in a multiple co led only after all requ level of O at 100	le with BLM/BIA. Required impletion or recompletion in irements, including reclama (1977) and (1977	d subsequent reports must be had new interval, a Form 3160-tion, have been completed, and BWPD.  ABWPD.  Label AS	A many be filed once d the operator has	
New Well	1 notice +	<sup>#</sup> 59				
14. I hereby certify that the foreg Name (Printed/Typed)	oing is true and correct		Augst .	1	-0.1	
Nichelle 1	<u>400res</u>	Title	Madue	tuon UN	Wyst	
Signature Wichel	lleMoore	Date	aug 2	2005	<i>O</i>	
THIS SPACE FOR FEDERAL OR STATE OFFICE USFACCEPTED FOR RECORD						
Approved by  Conditions of approval, if any, are att	esched. Approval of this natice do	ec not warrant or	Title	Date SEP	2 2005	
certify that the applicant holds legal of which would entitle the applicant to of	or equitable title to those rights in the		Office	FARMINGTON D	ISTRICT OFFICE	
Title 18 U.S.C. Section 1001 and Title 4 States any false, fictitious or frauduler	3 U.S.C. Section 1212, make it a craft statements or representations as	ime for any person to any matter within	knowingly and willfully to its jurisdiction.	make any department or a	geney of the United	