| Form 3160-5 UNITED STATE | res | FORM | APPROVED | |
|--|------------------------------|---|--|--|
| (August 2007) DEPARTMENT OF THE INTERIOR | | OMB No. 1004-0137 | | |
| BUREAU OF LAND MANAGEMENT | | Expires: July 31, 2010 | | |
| to to transcent of the second second | | 5. Lease Serial No. NM-0607 | | |
| ილ 18s@ĝĝry notices and reports on wells | | 6. If Indian, Allottee or Tribe | | |
| Do not use this form for proposals abandoned wells: Use Form 3160-3 (| to drill or to re-enter an | | | |
| Russey of Land M. SUBMIT IN TRIPLICATE - Other instructions on page 2. | | 7. If Unit of CA/Agreement, Name and/or No. | | |
| 1. Type of Well | | | | |
| Oil Well X Gas Well Other | | 8. Well Name and No. Atlantic C-4 | | |
| 2. Name of Operator Burlington Resources Oil & Gas Company LP | | 9. API Well No. 30- | 30-045-10046 | |
| 3a. Address 3b. Phone No. (include area code) | | 10. Field and Pool or Exploratory Area | | |
| PO Box 4289, Farmington, NM 87499 | (505) 326-9700 | | | |
| 4. Location of Well (Footage, Sec.; T.,R.,M., or Survey Description) Surface Unit N (SESW), 990' FSL & 1650' FWL | , Sec. 31, T31N, R10W | 11. Country or Parish, State San Juan | New Mexico | |
| 12. CHECK THE APPROPRIATE BOX(E | S) TO INDICATE NATURE OF NO | OTICE, REPORT OR OTH | IER DATA | |
| TYPE OF SUBMISSION | TYPE OF AC | TYPE OF ACTION | | |
| Notice of Intent Acidize | Deepen | Production (Start/Resume) | Water Shut-Off | |
| Alter Casing | | Reclamation | Well Integrity | |
| X Subsequent Report Casing Repair | | Recomplete | X Other Tubing | |
| Change Plans | = = | Temporarily Abandon | Repair | |
| Final Abandonment Notice Convert to Injection 13. Describe Proposed or Completed Operation: Clearly state all pertinent described by the converted of the conv | <u> </u> | Water Disposal | | |
| 9/24/13 MIRU DWS 730. ND WH NU BOPE. PT BO 10/2/13 TIH w/ 172 jts 2 3/8" 4.70 # J-55 TBG set 10/3/13 ND BOP NU WH Test TBG to 600# for 30 | @ 5316' w/ FN set @ 5317' (M | New TBG Set Depth). | BTD. | |
| 1000,101,1000,1000,1000,1000,1000 | | • |)// on | |
| | | <i>c.</i> | NOV A F. O. | |
| | | | NOV 0.5 2013 | |
| | | | | |
| 14. Thereby certify that the foregoing is true and correct. Name (Printed/: Kenny Davis | Typed) Title | Staff Regulatory Technician Title | | |
| Signature | Date | 10/7/2013 Date | | |
| | FOR FEDERAL OR STATE OF | FICE USE | BETTER TOTAL TOTAL | |
| Approved by | | | CICT 3 0 2013 | |
| · | Title | raa. | SASTA DESIGN SIZI DI VICTILI I | |
| 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. | | | COLUMN CO | |
| Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make it a false, fictitious or fraudulent statements or representations as to any matter | | ally to make to any department of | or agency of the United States any | |

(Instruction on page 2)