

RECEIVED

Form 3160-5  
(August 2007)UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FEB 28 2014

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

Farmington Field Office

5. Lease Serial No.

SF-078736

Bureau of Land Management

6. If Indian, Allottee or Tribe Name

**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 page 2.

1. Type of Well

☐ Oil Well☒ Gas Well☐ Other

7. If Unit of CA/Agreement, Name and/or No.

8. Well Name and No.

Gobernador 3

2. Name of Operator

ConocoPhillips Company

9. API Well No.

30-039-21783

3a. Address

PO Box 4289, Farmington, NM 87499

3b. Phone No. (include area code)

(505) 326-9700

10. Field and Pool or Exploratory Area

Gobernador Pictured Cliffs

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Surface Unit M (SWSW), 1170' FSL &amp; 1110' FWL, Sec. 14, T29N, R5W

11. Country or Parish, State

Rio Arriba, New Mexico

## 12. CHECK THE 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 type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input checked="" 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	FAN
	<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 recomplate 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recomplate in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

The subject well was P&A'd on 8/1/07. Reclamation was completed and the location is now ready for final closure approval. Burlington Resources requests a final field inspection of the reclamation at this time. If the final reclamation meets BLM requirements, please remove this well from the ConocoPhillips Company bond. Fee surface owner letter and certified mail receipt attached.

RCVD MAR 12 '14  
OIL CONS. DIV.  
DIST. 3

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)

Dollie L. Busse

Staff Regulatory Technician

Title

Signature

Date

2/28/14

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title Branch Chief

Date

MAR 10 2014

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.

Environmental Protection and Realty  
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.

(Instruction on page 2)

NMOCDA



ConocoPhillips Company  
REFS-PTRRC – San Juan Business Unit  
Maclovía Blakley  
3401 East 30<sup>th</sup> Street  
Farmington, NM 87402  
Telephone: (505) 326-9795  
Facsimile: (505) 324-6136  
[Maclovía.Blakley@conocophillips.com](mailto:Maclovía.Blakley@conocophillips.com)

VIA CERTIFIED MAIL – RETURN RECEIPT REQUESTED

July 16, 2013

Juan Talamantes  
PO Box 222  
Dulce, NM 87528

Subject: Final Reclamation Approval  
**Gobernador 3**  
SWSW Section 14, T29N, R5W  
Rio Arriba County, New Mexico

Dear Landowner:

ConocoPhillips Company is hereby notifying you of the completed final reclamation to the above referenced well.

Enclosed for your review and approval, please find Final Reclamation Detail and Approval form and return in self-addressed stamped envelope, or notify us within five (5) days of receiving this letter. If we do not hear from you within the designated five (5) day time frame, we will consider this your approval to proceed.

If you have any questions regarding this matter, please call the PTRRC Department at (505) 324-6111.

Sincerely,

*Maclovía Blakley*

Maclovía Blakley  
Senior Staff PTRRC

<b>2. Article Number</b>		<b>COMPLETE THIS SECTION ON DELIVERY</b>	
71791000164205817636		A. Signature x <i>Juan Talamante</i> <input checked="" type="checkbox"/> Agent <input type="checkbox"/> Addressee	
		B. Received by (Printed Name) <i>Juan Talamante</i>	C. Date of Delivery <i>7/18/13</i>
		D. Is delivery address different from item 1? <input type="checkbox"/> Yes If YES enter delivery address below: <input checked="" type="checkbox"/> No	
		3. Service Type <input checked="" type="checkbox"/> Certified	
1. Article Addressed to:  Juan Talamantes PO Box 222 Dulce, NM 87528		4. Restricted Delivery? (Extra Fee) <input type="checkbox"/> Yes	

Code: GOBERNADOR 3  
Code2: SEC 14-T29N-R5W

PS Form 3811

Domestic Return Receipt

<b>U.S. Postal Service</b>	
<b>CERTIFIED MAIL™ RECEIPT</b>	
<small>(Domestic Mail Only; No Insurance Coverage Provided)</small>	
<small>For delivery information visit our website at <a href="http://www.usps.com">www.usps.com</a></small>	
71791000164205817636	

Postage	\$0.46	Postmark Here
Certified Fee	\$3.10	
Return Receipt Fee (Endorsement Required)	\$2.55	
Restricted Delivery Fee (Endorsement Required)	\$0.00	
Total Postage & Fees	\$6.11	

Sent To  
Street, Apt. No.,  
or PO Box No.  
City, State, Zip+4

Juan Talamantes  
PO Box 222  
Dulce, NM 87528

Code: GOBERNADOR 3  
Code2: SEC 14-T29N-R5W

PS Form 3800, August 2006 See Reverse for Instructions