

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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FORM APPROVED  
OMB No. 1004-0137  
Expires: March 31, 2007

**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.*

Farmington Field Office  
Bureau of Land Management  
Lease Serial No. NMSF 078360

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other <b>OIL CONS. DIV DIST. 3</b>		6. If Indian, Allottee or Tribe Name
2. Name of Operator WPX Energy Production, LLC		7. If Unit of CA/Agreement, Name and/or No. NMNM 132829 (CA)
3a. Address PO Box 640    Aztec, NM 87410		8. Well Name and No. Chaco 2306-18M #292H
3b. Phone No. (include area code) 505-333-1806		9. API Well No. 30-039-31237
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sur: 275' FNL & 197' FWL, Sec 18, T23N, R6W    BHL: 1944' FSL & 139' FEL, Sec 14, T23N, R7W		10. Field and Pool or Exploratory Area Lybrook Gallup
		11. Country or Parish, State Rio Arriba, NM

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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 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 checked="" type="checkbox"/> Other <b>FINAL CASING</b>
	<input type="checkbox"/> Change Plans	<input 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 must 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 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.)

**7/28/14 thru 7/31/14** - Drill 6-1/8" lateral  
**8/1/14** - TD 6-1/8" lateral @ 11064' (TVD 5443'), 1000hrs  
**8/2/14** - Run 136 jts 4-1/2", 11.6#, N-80, LT&C. CSG set @ 11055' (TVD 5443'), LC @ 10973', RSI tools 10955', marker jts @ 7542' & 9240', TOL @ 5860'  
**8/3/14** - Press Test 6000#, pump Spacers, 10 Bbl FW, 40 Bbl Tuned Spacer @ 9.5ppg, Cap = 40sx Elastiseal ( 10.4 Bbl, 58cf ) + 6.92wgps ( 13ppg, 1.46 Yld ) Foamed Lead = 290sx Elastiseal + 2% ChemFoamer 760 ( 75.4 Bbl, 394cf ) + 6.92wgps ( 13ppg, 1.46 Yld ) Tail = 100sx Expandecem ( 23.2 Bbl, 130cf ) + 5.81wgps ( 13.5ppg, 1.3 Yld ) clean lines & drop Dart Plug, Displace W/ 135.5 Bbl ( 40 Bbl MMCR, 40 Bbl 2%KCL, 20 Bbl FW, 35.5 Bbl 2%KCL ) Final Press 820#, Bump Plug to 1428#, check Float, Held. Plug Dn @ 02:20, 08/03/14. 129' Overlap in 7" Casing. Drop Ball & wait 30 Min, Press to 4131# to Shear Disc & set Hanger, Pull 100K over, Set 75K Dn, Hanger is set. Pull up 45' Pumping 3BPM & Clean TOL W/ 160 Bbl 2%KCL, 30 Bbl Foamed Cmt to Blow Tank, Full Returns Thru Entire Job. Press Test TOL @ 1500# for 30 Mjn & Chart, Good. ✓  
 Release AWS #730 @ 1900 on 8/3/14 ✓

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Larry Higgins		Title Regulatory Specialist
Signature <i>Larry Higgins</i>		Date 8/4/14

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.

(Instructions on page 2)

ACCEPTED FOR RECORD

NMOCDFV

AUG 08 2014

FARMINGTON FIELD OFFICE  
BY: *William Tambekar*