

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 reenter an abandoned well. Use Form 3160-3 (APD) for such proposals.

5. Lease Serial No.
Fee/NMNM 023041
6. If Indian, Allottee or Tribe Name
OIL CONS. DIV DIST. 3

SUBMIT IN TRIPLICATE - Other instructions on reverse side

7. If Unit or CA/Agreement Name and/or N
NOV 07 2014

1. Type of Well
 Oil Well Gas Well Other **NOV 04 2014**

2. Name of Operator
TnT Environmental Inc. **FARMINGTON FIELD OFFICE**

3a. Address *HC 74 Box 113, Lindrith, NM 87029*
3b. Phone No. (include area code) *505-320-2130*

8. Well Name and No.
TnT SWD #1
9. API Well No.
30-039-31257

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Unit L, 439' fwl & 1761' fsl, Section 8, T25N, R3W

10. Field and Pool, or Exploratory Area
Entrada SWD
11. County or Parish, State
Rio Arriba, NM

12. CHECK 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 Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair <input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Recomplete <input type="checkbox"/> Other
	<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 Operations (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 shall 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 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.)

Spud 12-1/4" surface hole at 02:00 hr 9/25/2014. TD surface hole at 560' at 13:00 hrs 9/25/2014.

Ran 12 just of 9-5/8" 36# J55 casing. Land casing at 552' KB. Cement casing w/ 325 sx (381.5 cf) of Varicem Cement w/ 2% CaCl2 & 1/4#/sx of Poly-E-Flake. Total of 68 bbls of slurry mixed at 15.8 lbs/gal. Displace cement w/ 39.4 bbls of fresh water. PD at 19:30 hrs 9/25/2014. Pressure up on plug and casing to 850 psi - held OK. Circulated 20 bbls of good cement to surface. Install WH & NU BOPE. 3rd party pressure test BOP & related equipment to 250 psi - 5 min & 2000 psi - 15 min. All test good. Pressure test casing to 1500 psi - held OK for 30 min. ✓

Casing & cement job witnessed by J. Ruybulid w/ BLM & J. Durham w/ NMOCD

14. I hereby certify that the foregoing is true and correct

Name (Printed/Typed) John C. Thompson	Title Agent / Engineer
Signature 	Date October 5, 2014

THIS SPACE FOR FEDERAL OR STATE USE

Approved by	Title	Date
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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, 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.

ACCEPTED FOR RECORD

NOV 05 2014

NMOCD

FARMINGTON FIELD OFFICE
BY: *William Tambekou*