

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

FORM APPROVED
OMB NO. 1004-0135
Expires: July 31, 2010

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.

JUN 29 2015

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

Farmington Field Office
Bureau of Land Management

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMSF078357
2. Name of Operator FOUR STAR OIL GAS COMPANY Contact: APRIL E POHL E-Mail: APRIL.POHL@CHEVRON.COM		6. If Indian, Allottee or Tribe Name
3a. Address 332 ROAD 3100 AZTEC, NM 87410	3b. Phone No. (include area code) Ph: 505-333-1941 Fx: 505-334-7134	7. If Unit or CA/Agreement, Name and/or No. Well Name and No. MARSHALL A 3
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 15 T27N R9W SWNE 1380FNL 1650FEL 36.578720 N Lat, 107.771973 W Lon		9. API Well No. 30-045-06536-00-S2
		10. Field and Pool, or Exploratory BASIN Fruitland Coal
		11. County or Parish, and State SAN JUAN COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Final Abandonment Notice	<input checked="" type="checkbox"/> Casing Repair	<input 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 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 recompleat 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 recompleat 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.)

FOUR STAR OIL & GAS COMPANY RESPECTFULLY REQUESTS PERMISSION TO REPAIR A POSSIBLE CASING LEAK ON THE MARSHALL A 3.

- ? Rig up rig
- ? Install and test BOPs
- ? POOH with pump and rods
- ? POOH with tubing
- ? Run CBL
- ? Test Casing
- o If casing passes:
-  Tag fill, cleanout/acidize as needed
-  RIH with tubing to ~2100'
-  RIH with pump and rods

BLM'S APPROVAL OR ACCEPTANCE OF THIS ACTION DOES NOT RELIEVE THE LESSEE AND OPERATOR FROM OBTAINING ANY OTHER AUTHORIZATION REQUIRED FOR OPERATIONS ON FEDERAL AND INDIAN LANDS

OIL CONS. DIV DIST. 3

JUL 10 2015

SEE ATTACHED FOR
CONDITIONS OF APPROVAL

14. I hereby certify that the foregoing is true and correct. Electronic Submission #307362 verified by the BLM Well Information System For FOUR STAR OIL GAS COMPANY, sent to the Farmington Committed to AFMSS for processing by TROY SALYERS on 07/07/2015 (15TSL0303SE)	
Name (Printed/Typed) APRIL E POHL	Title REGULATORY SPECIALIST
Signature (Electronic Submission)	Date 06/29/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By TROY SALYERS	Title PETROLEUM ENGINEER	Date 07/07/2015
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 Farmington

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.

** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED **

NMOCD

BLM CONDITION OF APPROVAL

CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:

1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. If a CBL or other logs are run, provide this office with a copy.
2. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minute test period. Provide test chart with your subsequent report of operations
3. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.
4. Contact this office at (505) 564-7750 prior to conducting any cementing operations

SPECIAL STIPULATIONS:

1. Pits will be fenced during work-over operation.
2. All disturbance will be kept on existing pad.
3. All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.
4. Pits will be lined with an impervious material at least 12 mils thick.