UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANGEMENT

SUNDRY NOTICES	ABITS	DEDODTE	ON MEDICAL	TC
SUNDRY NOTICES	ANII	REPUBLIS	UN WEL	.1.5

	FORM A	APPROVED
	OMB No	. 1004-0135
N1	20. 2000	

Cumiros	November	20	2000	

Lease Serial No.		
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Do not use this form for proposals to drill or to re-enter an Abandoned well. Use			SF - 077123							
Form 3160-3 (APD) for such proposals					HILLI	, Allottee or to				
SUBMIT IN TRIPLIC	CATE – Otl	ier instruc	ctions	on revers		RE(7. Unit or C EIVED	A/Agreement	, Name and/or No.	
1. Type of Well					07	O FAR	48N (Well) Na	me and No.		
Oil Well X Gas Well	Other				•			Warren	LS 9	
2. Name of Operator							9. API W	ell No.		
BP America Production Company Attn: Mary Corley							30-045-	20279		
3a. Address			No. (inclu	de area code))		10. Field and	Pool, or Expl	oratory Area	
P.O. Box 3092 Houston, TX 772	33			-366-4491			Aztec Pictured Cliffs			
4. Location of Well (Footage, Sec., T.,		Description)					11. County or Parish, State			
-	1740' FWL		28N R0	9W		ļ	San Juan County, New Mexico			
12 CHECK	APPROPRIATI	BOY(ES) TO	INDICA	TE NATURE	OR N	OTICE RE	PORT OR OT	HER DATA		
12. CHECK	AFFROFRIATI	BOX(ES) TO	INDICA	TE NATURE	OKN	OTICE, KE	roki, okoi	IIEK DATA		
TYPE OF SUBMISSION					TYPE	OF ACTIO	N			
Notice of Intent	Acidize	므	Deepen		Ц	Production	n (Start/Resum	e)	☐ Water shut-Off	
X Subsequent Report	☐ Alter Cas	ng 🔲	Fracture	Treat		Reclamati	ion		☐ Well Integrity	
Final Abandonment Notice	Casing Re	epair 🔲	New Co	nstruction .		Recomple	ete		☐ Abandon	
	Change P	lans 🗓	Plug an	d Abandon		Water Dis	sposal			
	☐ Injection		Plug Ba	ck		Other				
01/20/2006 MIRUSU. Blow dow CMT to surface. Notified Steve CLS G CMT & circ to surface. identification plate.	Mason with I Pumped CM	BLM of inten I down the 2	t to plu 27/8" C	g using coil SG & filled t	TBG o surf	unit & Cl face. Cut	MT from CIBI off wellhead	P to surface	. Pumped 20.5 BBLS	
01/24/2006 RDMOSU. Location	n turned ove	r to environi	mental (group for su	ırface	restoratio	on.	5.67.83	FEB 2006 RECEIVED L CONS. DIV.	
14. I hereby certify that the foregoing is	true and correc	ı						Jan	SHOH. 2	
Name (Printed/typed)	Mary Corley			Title			Senior F	Regulatory	Malyat COC2 teviland	
Signature Mary art	les			Date				1/30/2006	AU VA	
	THIS	SPACE FOR	FEDE	RAL OR S	TATE	OFFICE	USE	Program		
Approved by				Title			Dat	e		
Conditions of approval, if any, are attached. Ap that the applicant holds legal or equitable title to entitle the applicant to conduct operations thereo	those rights in the	subject lease whi	ich would	Office						
Title 18 U.S.C. Section 1001 and Title 43 United States any false, fictitious or fraud									ment or agency of the	

FEB 1 3 2006

