Form 3160-5 (June 2015)

## UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB NO. 1004-0137 Expires: January 31, 2018

| Do not use the                                               | 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.  5. Lease Scrial No. NMSF079319  6. If Indian, Allottee or Tribe Name |                                                    |                       |                                  |                        |  |
|--------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------|-----------------------|----------------------------------|------------------------|--|
| SUBMIT IN                                                    | TRIPLICATE - Other ins                                                                                                                                                                                                             | structions on page 2                               | 7. If                 | Unit or CA/Agree                 | ement, Name and/or No. |  |
| Type of Well     Oil Well                                    | ner                                                                                                                                                                                                                                |                                                    |                       | ell Name and No.<br>CHWERDTFEGE  | ER A LS 010            |  |
| Name of Operator     BP AMERICA PRODUCTION                   | Contact: COMPAN-Mail: patti.cam                                                                                                                                                                                                    | PATTI CAMPBELL<br>pbell@bpx.com                    |                       | PI Well No.<br>0-045-06959       |                        |  |
| 3a. Address<br>1199 MAIN AVE, SUITE 101<br>DURANGO, CO 81301 |                                                                                                                                                                                                                                    | 3b. Phone No. (include area code) Ph: 970-712-5997 |                       | Field and Pool or E<br>BLANCO PC |                        |  |
| 4. Location of Well (Footage, Sec., 7                        | ., R., M., or Survey Descriptio                                                                                                                                                                                                    | n)                                                 | 11. (                 | County or Parish, S              | State                  |  |
| Sec 31 T28N R08W Mer NMF<br>36.613523 N Lat, 107.729270      |                                                                                                                                                                                                                                    | /L                                                 | S                     | AN JUAN COL                      | JNTY COUNTY, NM        |  |
| 12. CHECK THE AI                                             | PPROPRIATE BOX(ES                                                                                                                                                                                                                  | ) TO INDICATE NATURE O                             | F NOTICE, REP         | ORT, OR OTH                      | IER DATA               |  |
| TYPE OF SUBMISSION                                           |                                                                                                                                                                                                                                    | TYPE OF                                            | ACTION                |                                  |                        |  |
| □ Notice of Intent                                           | ☐ Acidize                                                                                                                                                                                                                          | □ Deepen                                           | ☐ Production (S       | tart/Resume)                     | ☐ Water Shut-Off       |  |
|                                                              | ☐ Alter Casing                                                                                                                                                                                                                     | ☐ Hydraulic Fracturing                             | ☐ Reclamation         |                                  | ■ Well Integrity       |  |
| Subsequent Report                                            | ☐ Casing Repair                                                                                                                                                                                                                    | ■ New Construction                                 | ☐ Recomplete          |                                  | Other                  |  |
| ☐ Final Abandonment Notice                                   | ☐ Change Plans                                                                                                                                                                                                                     | □ Plug and Abandon                                 | ☐ Temporarily Abandon |                                  |                        |  |

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.

☐ Plug Back

Attached is an updated survey of the Schwerdtfeger A LS 010 well.

☐ Convert to Injection



■ Water Disposal

BISTRICT 111

| 14. I hereby certify                                                                                                                                                                                                                                      | that the foregoing is true and correct.  Electronic Submission #472444 verifie  For BP AMERICA PRODUCTION C  Committed to AFMSS for processing b | OMPAN                   | IY, sent to the Farmington                                                             |  |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------|----------------------------------------------------------------------------------------|--|--|
| Name (Printed/T                                                                                                                                                                                                                                           | yped) PATTI CAMPBELL                                                                                                                             | Title                   | REGULATORY ANALYST                                                                     |  |  |
| Signature                                                                                                                                                                                                                                                 | (Electronic Submission)                                                                                                                          | Date                    | 07/08/2019                                                                             |  |  |
|                                                                                                                                                                                                                                                           | THIS SPACE FOR FEDERA                                                                                                                            | L OR                    | STATE OFFICE USE                                                                       |  |  |
| Approved By                                                                                                                                                                                                                                               |                                                                                                                                                  | Title                   | ACCEPTED FOR RECORD                                                                    |  |  |
| 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. |                                                                                                                                                  |                         | JUL 0 8 2019                                                                           |  |  |
| Title 18 U.S.C. Section<br>States any false, fict                                                                                                                                                                                                         | on 1001 and Title 43 U.S.C. Section 1212, make it a crime for any petitious or fraudulent statements or representations as to any matter with    | rson kno<br>ithin its j | owingly and willfully to make the any department of a series of the third urisdiction. |  |  |

(Instructions on page 2)

\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\*



DISTRICT I
1625 N French Dr., Hobbs, N.M. 88240
Phone: (575) 393-6161 Fax: (575) 393-0720
DISTRICT II
811 S. First St., Artesia, N.M. 88210
Phone: (575) 748-1283 Fax: (575) 748-9720
DISTRICT III
1000 Rio Brazos Rd., Aztec, N.M. 87410
Phone: (505) 334-6178 Fax: (506) 334-6170
DISTRICT IV
1220 S. St. Francis Dr., Santa Fe, N.M. 87505
Phone: (506) 476-3460 Fax: (505) 476-3462

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised August 1, 2011
Submit one copy to appropriate
District Office

OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, N.M. 87505

☐ AMENDED REPORT

## AS-DRILLED

## WELL LOCATION AND ACREAGE DEDICATION PLAT

| 1 API          | Number    |               | • 1                           | Pool Code    |                  |                                                  | <sup>3</sup> Pool Name |                |             |  |
|----------------|-----------|---------------|-------------------------------|--------------|------------------|--------------------------------------------------|------------------------|----------------|-------------|--|
| 30-04          | 15-06959  |               |                               | 172          | 3/9 SO.          | SO. BLANCO PICTURE CLIFFS EXT. /BLANCO MESAVERDE |                        |                |             |  |
| *Property Code |           |               | *Property Name                |              |                  |                                                  |                        |                | Well Number |  |
|                |           |               | SCHWERDTFEGER A LS            |              |                  |                                                  |                        |                | 010         |  |
| OGRID N        |           | Operator Name |                               |              |                  |                                                  |                        | * Elevation    |             |  |
|                |           |               | BP America Production Company |              |                  |                                                  |                        |                | 5922        |  |
|                |           |               |                               |              | 10 Surface       | e Location                                       |                        |                |             |  |
| UL or lot no.  | Section   | Township      | Range                         | Lot Idn      | Feet from the    | North/South line                                 | Feet from the          | East/West line | County      |  |
| M              | 31        | 28 N          | 08 W                          | LOT 4        | 804              | SOUTH                                            | 463                    | WEST           | SAN JUAN    |  |
|                |           |               | 11 Bott                       | om Hole      | Location         | If Different Fr                                  | om Surface             |                |             |  |
| UL or lot no.  | Section   | Township      | Range                         | Lot ldn      | Feet from the    | North/South line                                 | Feet from the          | East/West line | County      |  |
| Dedicated Acre |           |               |                               | nt or Infill | 14 Consolidation | Code 10 Order N                                  | lo.                    |                |             |  |
| 37.59 Ac.(P    | (C), 291. | 16 Ac.(M      | V)                            |              |                  |                                                  |                        |                |             |  |

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

