

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

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 Serial No.
NMNM013686

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2

7. If Unit or CA/Agreement, Name and/or No.

1. Type of Well
 Oil Well Gas Well Other

8. Well Name and No.
PRITCHARD 6E

2. Name of Operator **BP AMERICA PRODUCTION COMPANY** Contact: PATTI CAMPBELL
Email: patti.campbell@bpx.com

9. API Well No.
30-045-26149-00-S1

3a. Address
1199 MAIN AVE
DURANGO, CO 81301

3b. Phone No. (include area code)
Ph: 970-712-5997

10. Field and Pool or Exploratory Area
BASIN FRUITLAND COAL

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 34 T31N R9W NWNW 1065FNL 900FWL
36.858990 N Lat, 107.773390 W Lon

11. County or Parish, State
SAN JUAN COUNTY, NM

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"/> Hydraulic Fracturing	<input type="checkbox"/> Reclamation	<input checked="" 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 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 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.

Attached is the successful MIT for the Pritchard 6E Pressure Observation Well run 6/18/2019 and witnessed by NMOCD personnel.

The MIT chart is attached.

A Bradenhead test is being scheduled for this well and will be submitted as soon as it is completed.

NMOCD
JUL 10 2019
DISTRICT III

14. I hereby certify that the foregoing is true and correct.
Electronic Submission #470781 verified by the BLM Well Information System For BP AMERICA PRODUCTION COMPANY, sent to the Farmington Committed to AFMSS for processing by JOE KILLINS on 07/03/2019 (19JK0070SE)

Name (Printed/Typed) PATTI CAMPBELL Title REGULATORY ANALYST

Signature (Electronic Submission) Date 06/26/2019

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By **ACCEPTED** Title **JOE KILLINS ENGINEER** Date **06/18/2019**

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.

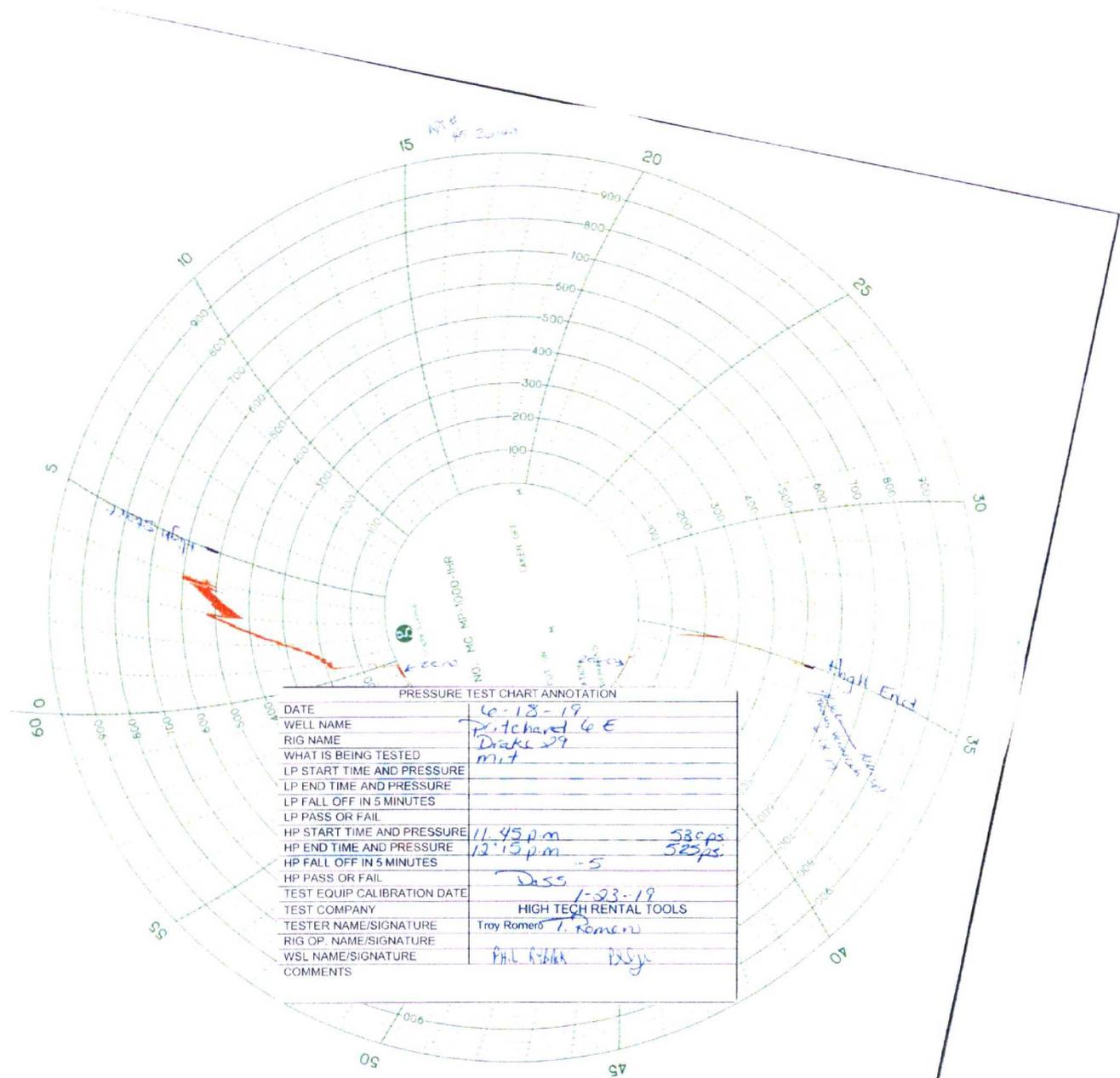
Office Farmington

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.

(Instructions on page 2)

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

NMOCD



PRESSURE TEST CHART ANNOTATION

DATE	6-18-19	
WELL NAME	Pritchard 4 E	
RIG NAME	Drake 29	
WHAT IS BEING TESTED	MIT	
LP START TIME AND PRESSURE		
LP END TIME AND PRESSURE		
LP FALL OFF IN 5 MINUTES		
LP PASS OR FAIL		
HP START TIME AND PRESSURE	11:45 p.m.	580 ps
HP END TIME AND PRESSURE	12:15 p.m.	525 ps.
HP FALL OFF IN 5 MINUTES	-5	
HP PASS OR FAIL	Pass	
TEST EQUIP CALIBRATION DATE	1-23-19	
TEST COMPANY	HIGH TECH RENTAL TOOLS	
TESTER NAME/SIGNATURE	Troy Romero T. Romero	
RIG OP. NAME/SIGNATURE	Phil Ryback P. Ryback	
WSL NAME/SIGNATURE	Phil Ryback P. Ryback	
COMMENTS		