

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires January 31, 2004

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.

SUBMIT IN TRIPLICATE - Other instructions on reverse side

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

3TEC ENERGY CORPORATION (FLOYD OIL COMPANY)

3a. Address **700 MILAM STREET, SUITE 1100** 3b. Phone No. (include area code)

HOUSTON, TX 77002-2815 (713) 821-7100

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

800' FSL, 990' FWL (NE SW SW)

SECTION 7-24N-5W NMPM

5. Lease Serial No.

6. If Indian, Allottee or Tribe Name

Jicarilla Tribal #69

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

8. Well Name and No.

Apache Federal #4

9. API Well No.

30-039-05555

10. Field and Pool, or Exploratory Area

BALLARD PICTURE CLIFF

11. County or Parish, State

Rio Arriba Co., NM

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

TYPE OF SUBMISSION	TYPE OF ACTION			
☐ Notice of Intent	☐ Acidize	☐ Deepen	☐ Production (Start/Resume)	☐ Water Shut-Off
☒ Subsequent Report (Page 1)	☐ Alter Casing	☐ Fracture Treat	☐ Reclamation	☒ Well Integrity
☐ Final Abandonment Notice	☐ Casing Repair	☐ New Construction	☐ Recomplete	☐ Other
	☐ Change Plans	☐ Plug and Abandon	☐ Temporarily Abandon	
	☐ Convert to Injection	☐ Plug Back	☐ 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 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.) **Bond # 929144797**

4/28/03 MIRLUWSL, NDWH, NUBOP, checked PBTD, PULLED tubing, Ran RBP & Packer, SET RBP @ 1,998', TESTED 5 1/2" PRODUCTION Casing 1998' - SURFACE, 1000 PSI, HELD, NO Casing LEAK.

4/29/03 OPSI ON SI Bradenhead, TESTED Casing 590 PSI, 30 minutes, Using CHART Recorder, CHART attached. NO Casing LEAK. Checked FOR bradenhead / Csghead COMMUNICATION by Pumping WATER in bradenhead, Found THAT Casinghead / Tbghead SEALS Leaked and there WAS NO upper Pack-OFF SEAL in the Tbghead. Repacked Casinghead and Replaced Tbghead, Pressure TEST head 1000 PSI.

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

Name (Printed/Typed)

STEVE WILSON

Title

SUPERINTENDENT

Signature

Steve Wilson

Date

PHONE (918) 223-5849

5/15/03

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

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.

Title

Date

Office

UNITED STATES
DEPARTMENT OF THE INTERIOR
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Page 2

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CONTINUED -

4/30/03 Ops: ON SI Bradenhead. PULLED RBP, Ran SN and 71JS
2318" Tubing, EOT 2,166', NDBOP, NMWH, Swabbed 7BW,
RD MO WSK. TURNED WELL TO Sales.

5/14/03 40MCF, 0BW, 102 FTP, 120 SICP, 0 SI Bradenhead, 100LP
No Gas FROM Bradenhead.

**NOTE: 3 TEC will schedule Bradenhead Test, with proper
Notification, First Week of June 2003.**

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Steve Wilson

Title **SUPERINTENDENT**

Signature **Steve Wilson**

Phone **(918) 223-5849**

Date **5/15/03**

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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 reverse)

TEST REPORT# 4365
REPAIR ORDER#



4/29/03

QUADCO, INC.
PO BOX 5340
FARMINGTON, NM 87499

PHONE 505-327-0486

FAX 505-327-0480

CUSTOMER: 3 Tech
ADDRESS:
CITY, STATE:

CUSTOMER PHONE:
CUSTOMER FAX:
CONTACT:

SYSTEM: Foxboro Chart Recorder
CAPACITY: 0 to 2000
SERIAL NUMBER: 2877406

LOAD APPLIED
PSI

25% 400

50% 800

75% 1400

100% 1800

AS FOUND
PSI

400

800

1380

1780

AS LEFT
PSI

400

800

1400

1800

ROOM TEMPERATURE: 70°F
DATE TESTED: 4/29/03
TESTED BY: CH
INIDE CHECK: CH

TEST EQUIPMENT: 12" M/D Test Gauge
TEST EQUIPMENT S/N: PL 200-1
CHECKED BY: CH

THIS INSTRUMENT HAS BEEN CALIBRATED WITH A PRESSURE STANDARD
WHOSE ACCURACY IS TRACEABLE TO THE N.I.S.T. TEST NUMBERS.

MODEL: RS DWT 2-1 S/N: 5212

TEST NUMBERS: P-8365, P-8109, F-8085

RECOMMENDED CALIBRATION:

CALIBRATION REPORT APPROVED BY:

COPY FOR YOUR
INFORMATION