

RECEIVED

Form 3160-5  
(August 2007)

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

SEP 23 2013

Farmington Field Office  
Bureau of Land Management

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.

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

5. Lease Serial No. **SF-078439**  
6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well  
 Oil Well  Gas Well  Other

7. If Unit of CA/Agreement, Name and/or No.  
8. Well Name and No. **Johnston Federal 15S**

2. Name of Operator **Burlington Resources Oil & Gas Company LP**

9. API Well No. **30-045-32129**

3a. Address **PO Box 4289, Farmington, NM 87499**

3b. Phone No. (include area code) **(505) 326-9700**

10. Field and Pool or Exploratory Area **Basin FC**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)  
**Surface UL L (NWSW), 1560' FSL & 880' FWL, Sec. 35, T31N, R9W**

11. Country or Parish, State **San Juan New Mexico**

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

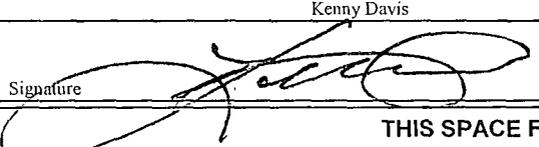
TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input 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 checked="" type="checkbox"/> Other <u>Legacy</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Reclamation</u>
	<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.)

Burlington Resources Oil & Gas Company LP completed the Legacy reclamation of the location on 8/27/13, as requested by Mike Flaniken during the onsite inspection. Please schedule a field inspection to verify Burlington Resources has met the BLM requirements on this reclamation work.

OIL CONS. DIV DIST. 3  
OCT 29 2013

ACCEPTED FOR RECORD  
OCT 25 2013  
FARMINGTON FIELD OFFICE  
BY \_\_\_\_\_

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) **Kenny Davis** Title **STAFF REGULATORY TECHNICIAN**  
Signature  Date **9/23/2013**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_  
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 \_\_\_\_\_

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.

(Instruction on page 2)

NMOCDCa

List 17



Reclamation Form:

Date: 9-16-2013

Well Name: Johnston Federal 15S

Footages: 1560 FSL, 880 FWL Unit Letter: \_\_\_\_\_

Section: 35, T-31 -N, R-9 -W, County: SJ State: NM

Reclamation Contractor: Ace

Reclamation Start Date: 8-27-13

Reclamation Complete Date: 8-27-13

Road Completion Date: 8-27-13

Seeding Date: 8-30-13

**\*\*PIT MARKER STATUS (When Required):** Picture of Marker set needed

MARKER PLACED : \_\_\_\_\_ (DATE)

LATITUDE: \_\_\_\_\_

LONGITUDE: \_\_\_\_\_

Pit Manifold removed \_\_\_\_\_ (DATE)

Construction Inspector: Norman Faver Date: 9-16-13

Inspector Signature: *Norman Faver*

Office Use Only: Subtask \_\_\_\_\_ DSM \_\_\_\_\_ Folder \_\_\_\_\_ Pictures \_\_\_\_\_

Revised 6/14/2012

Johnston Federal 15S

BWM onsite Mike/shari

