

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

CONFIDENTIAL

FORM APPROVED
OMB No. 1004-0137
Expires: October 31, 2014

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.
NM 45208

6. If Indian, Allottee or Tribe Name
N/A

SUBMIT IN TRIPLICATE - Other instructions on page 2.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
Encana Oil & Gas (USA) Inc.

3a. Address
370 17th Street, Suite 1700 Denver, CO 80202

3b. Phone No. (include area code)
720-876-5867

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
SHL: 1754' FSL and 328' FWL Section 17, T24N, R9W
BHL: 2200' FSL and 330' FEL Section 17, T24N, R9W

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

8. Well Name and No.
Escrito L17-2409 03H

9. API Well No.
30-045-35545

10. Field and Pool or Exploratory Area
Bisti Lower-Gallup

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 checked="" 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 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>Installation of Gas Lift</u> |
| | <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.)

Encana Oil & Gas (USA) Inc. is requesting authorization to install gas lift at the Escrito L17-2409 03H well. Attached is a schematic of the pad with gas lift and the gas allocation procedure.

RCVD SEP 8 '14
OIL CONS. DIV.
DIST. 3

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Cristi Bauer Title Operations Technologist

Signature Cristi Bauer Date 8/14/14

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by [Signature] Title Pertr. Eng Date 9/5/14

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.

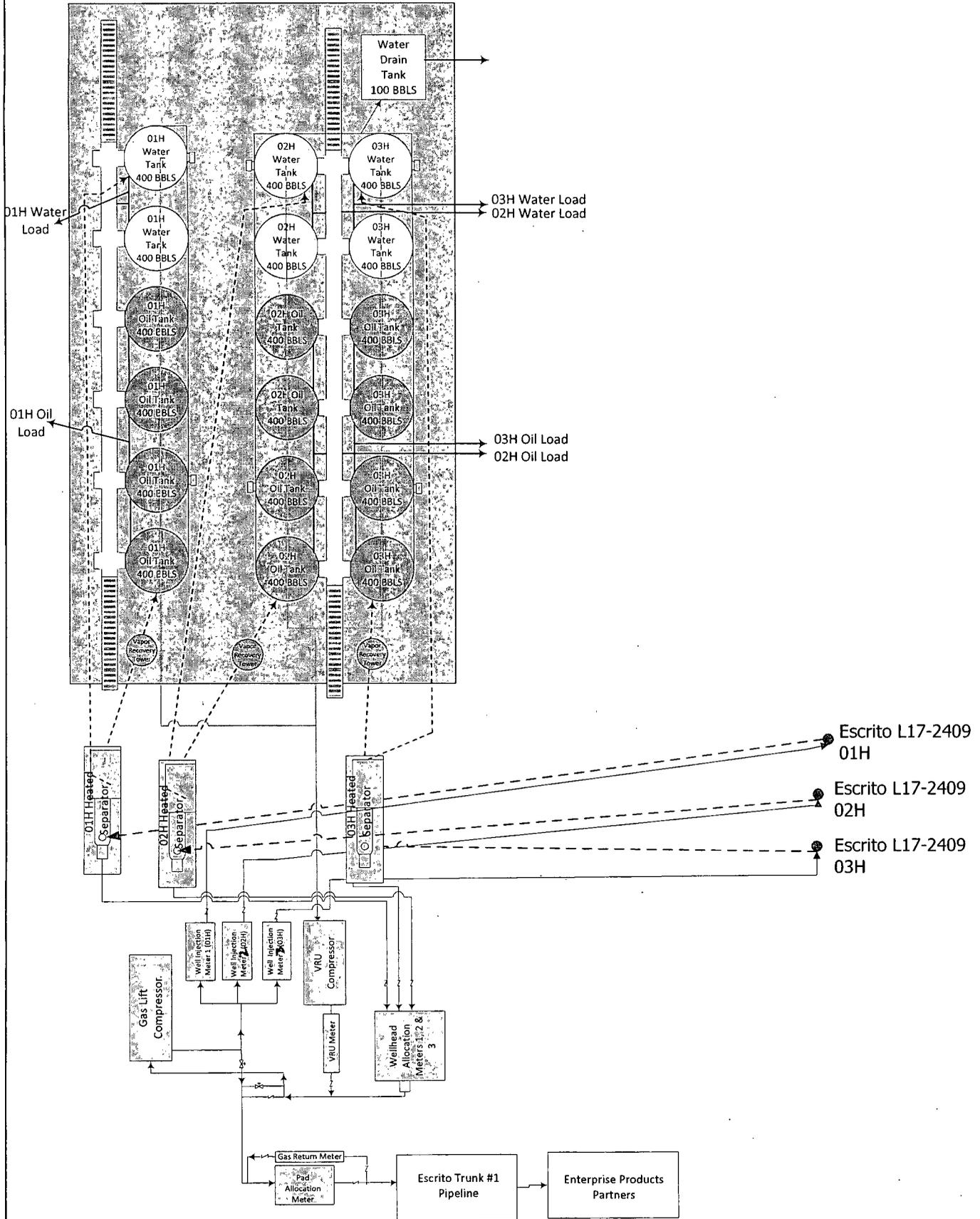
Office _____

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.

(Instructions on page 2)

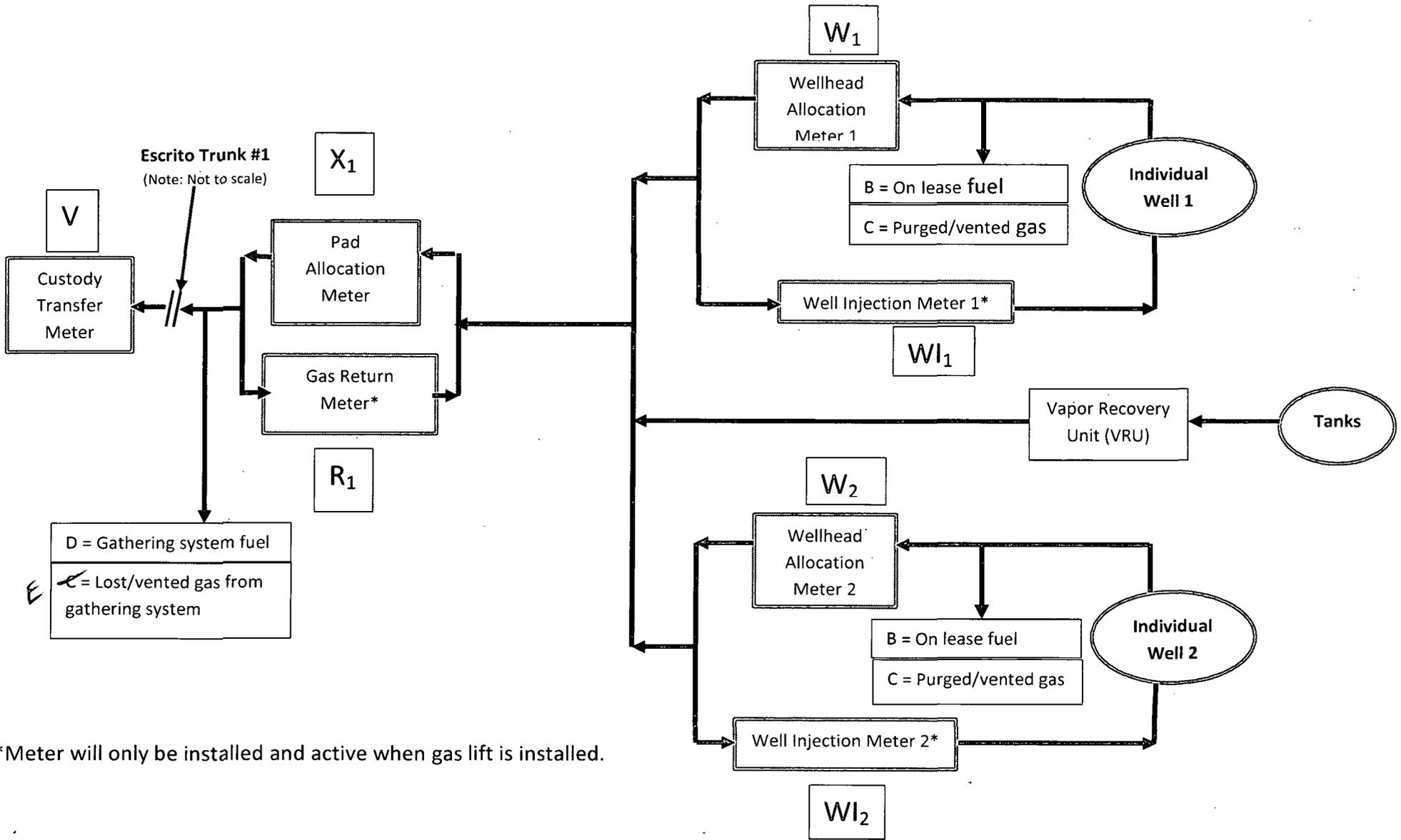
NMOCDA

Escrito L17-2409 01H, 02H, 03H



NOT TO SCALE

Gas Measurement Allocation Procedure for Multi-Well Pads



*Meter will only be installed and active when gas lift is installed.

Attachment No. 5
Encana Oil & Gas (USA) Inc.
Escrito Trunk #1
San Juan County, New Mexico

Base Data:

V = Gas Volume (MCF) from Custody Transfer Meter during allocation period (Enterprise)

X_x = Gas Volume (MCF) from Pad Allocation Meter during allocation period. (Encana)

R_x = Gas Volume (MCF) from Gas Return Meter at Well Pad (Encana)*

$(X_x - R_x)$ = Gas Volume (MCF) for total Well Pad Production (Encana)

W_x = Gas Volume (MCF) from Wellhead Allocation Meter at individual wells during allocation period. (Encana)

WI_x = Gas Volume (MCF) from Well Injection Meter at individual wells during allocation period. (Encana)*

Y = Heating Value (BTU/scf) from Custody Transfer Meter during allocation period. (Enterprise)

Z = Heating Value (BTU/scf) from individual Wellhead Allocation Meter and Well Injection Meter. (Encana)

Allocation Period is typically a calendar month and will be the same for all Well Pads and individual wells.

Well Pad Gas Production = A + B + C + D + E

A = Allocated Gas production off lease for Well Pad, MCF: $[(X_1 - R_1) / ((X_1 - R_1) + (X_2 - R_2) + (X_n - R_n))] * (V)$

Please note, gas production (MCF) for individual wells on a Well Pad is calculated using the formula:

$[(W_1 - WI_1) / ((W_1 - WI_1) + (W_2 - WI_2) + (W_n - WI_n))] * (X_1 - R_1)$

B = On lease fuel usage, MCF. Determined from equipment specification and operating conditions. This includes, but is not limited to, compression, vapor recovery unit (VRU) compression, burners, and pump jacks.

C = Lost and/or vented gas from well and/or lease equipment, MCF. Calculated using equipment and piping specifications and operating pressures.

D = Allocated fuel from gathering system equipment, MCF. The total fuel required to operate gathering system equipment will be allocated to the Well Pads benefiting from the equipment using allocation factors determined by $[(X_1 - R_1) / ((X_1 - R_1) + (X_2 - R_2) + (X_n - R_n))]$ and for individual wells using allocation factors determined by $[(W_1 - WI_1) / ((W_1 - WI_1) + (W_2 - WI_2) + (W_n - WI_n))]$.

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E = Allocated volume of gas lost and/or vented from the gathering system, gathering system equipment, condensate collection, and water collection in MCF. The total volume will be determined using industry accepted procedures the time of the loss. The total volumes lost and/or vented will be allocated to the Well Pads affected using factors determined by $[(X_1-R_1)/((X_1-R_1)+(X_2-R_2)+(X_n-R_n))]$, and for individual wells using factors determined by $[(W_1-W_{I1})/((W_1-W_{I1})+(W_2-W_{I2})+(W_n-W_{In}))]$.

Individual Well BTU's = $[(W_n-W_{In}) * Z_n / \text{SUM}((W_n-W_{In}) * Z_n)] * Y$

Individual well gas heating values to be determined in accordance with BLM regulations.



United States Department of the Interior

BUREAU OF LAND MANAGEMENT

Farmington Field Office
6252 College Blvd., Suite A
Farmington, New Mexico 87402

IN REPLY REFER TO:

CONDITIONS OF APPROVAL FOR GAS LIFT & BUY BACK METER INSTALLATIONS:

- The buy-back meter isolation valve, either up or down stream of the buy-back meter must be effectively sealed in the closed position to prevent produced gas from potentially by-passing the measurement and sales meter. In lieu of the seal requirement at least two check valves can be installed in line with the buy-back meter to prevent produced gas from potentially by-passing the measurement and sales meter.

Contact this office so a BLM witness verify installation of either the seal or check valves.

- If seals are installed, seal records must be maintained and made available upon request.
 - Post a Facility sign that **Clearly identifies both the sales and buy-back meters.**