

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 old or abandoned well. Use Form 3160-3 (APD) for such proposals.

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| SUBMIT IN TRIPLICATE - Other instructions on page 2. | | 5. Lease Serial No. NM 118133 |
| 1. Type of Well <input checked="" type="checkbox"/> Oil Well <input type="checkbox"/> Gas Well <input type="checkbox"/> Other | | 6. If Indian, Allottee or Tribe Name N/A |
| 2. Name of Operator Encana Oil & Gas (USA) Inc. | | 7. If Unit of CA/Agreement, Name and/or No. N/A |
| 3a. Address 370 17th Street, Suite 1700 Denver, CO 80202 | 3b. Phone No. (include area code) 720-876-5867 | 8. Well Name and No. Escrito L32-2408 01H |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) SHL: 1899' FSL and 226' FWL Section 32, T24N, R8W BHL: 1900' FSL and 330' FWL Section 31, T24N, R8W | | 9. API Well No. 30-045-35451 |
| | | 10. Field and Pool or Exploratory Area Basin Mancos |
| | | 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"/> 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 Conductor, Spud, Surface Casing/Cement |
| | <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 recompleate 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 recompleation 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.)

Set 20" 94# conductor at 120' on 9/22/14. 100sk Type I Neat cement, 16.6ppg. Cement to surface

Well spud 9/24/2014 ✓

Set surface casing string 9/25/14. Gelled freshwater mud system.

Hole diameter: 12.25", casing diameter: 9.625", casing weight and grade: 36ppf J55 LTC. Depth of 12.25" hole from 0-520' TVD/MD. Casing set from surface to 501' TVD/MD.

Pumped 247 sacks of Type III Halcem Cement + 2% bwoc CaCl + 0.125 lbs/sk Poly-E-Flake, yield 1.17 cuft/sk, mixed at 15.8 ppg on 9/25/14. Circulated 30bbbls to surface. WOC 6.0 hours for surface casing.

Float collar at 458'. TOC at surface and BOC at 520'. ✓

Tested BOP 9/26/14 to 3000# for 30minutes. Tested casing 9/26/14 to 1500# for 30 minutes. No pressure drop.

Drilled out cement and float collar 9/26/14.

ACCEPTED FOR RECORD

SET 17 2014

FARMINGTON FIELD OFFICE
BY: William Tambekou

| | | |
|---|--|-----------------------------|
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Cristi Bauer | | Title Operations Technician |
| Signature <i>Cristi Bauer</i> | | Date 10/16/14 |

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.

(Instructions on page 2)

NMOCDA