

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.
NM16760

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

OIL CONS. DIV DIST. 3

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: 1453' FSL and 446' FWL Section 18, T24N, R9W
BHL: 920' FSL and 330' FWL Section 13, T24N, R10W

5. Lease Serial No. NM16760

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

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

8. Well Name and No.
Escrito L18-2409 02H

9. API Well No.
30-045-35489

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

11. County or Parish, State
San Juan County

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 Intermediate 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 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.)

Set intermediate casing string 9/18/14. Gelled freshwater mud system.

Hole diameter: 8.75", casing diameter: 7", casing weight and grade: 26ppf J-55 LTC. Depth of 8.75" hole from 0-5963'TVD/MD.

Casing set from surface to 5883'MD. No DV Tool. Top of float collar at 5836' MD. TOC at surface and BOC at 5885'MD. ✓

Lead Cement pumped 9/19/14: 549 sks Premium Lite FM + 3% CaCl2 + 0.25#/sk Celloflake + 5#/sk LCM-1 + 8% Bentonite + 0.4% FL-52A + 0.4% Sodium Metasilicate, mixed at 12.1 ppg, yield 2.13 cuft/sk.

Tail Cement pumped 9/19/14: 415 sks Type III Cement + 1% bwoc CaCl + 0.25 lbs/sk cello flake + 0.2% bwoc FL-52A, yield 1.38 cuft/sk, mixed at 14.6 ppg. 50bbbs returned to surface. WOC 7 hours.

Tostod BOP 9/19/14 to 3000# for 30minutes. No pressure drop. Tested casing 9/19/14 to 1500# for 30 minutes. No pressure drop.

ACCEPTED FOR RECORD

OCT 23 2014

FARMINGTON FIELD OFFICE
BY: William Tambelkon

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

Title: Operations Technician

Signature: *Cristi Bauer*

Date: 10/22/14

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