

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**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 page 2.

|                                                                                                                                                        |                                                            |                                                                           |
|--------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------|---------------------------------------------------------------------------|
| 1. Type of Well<br><input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other                       |                                                            | 7. If Unit-of-CA/Agreement, Name and/or No.                               |
| 2. Name of Operator<br><b>Burlington Resources Oil &amp; Gas Company LP</b>                                                                            |                                                            | 8. Well Name and No.<br><b>Hare 16N</b>                                   |
| 3a. Address<br><b>PO Box 4289, Farmington, NM 87499</b>                                                                                                | 3b. Phone No. (include area code)<br><b>(505) 326-9700</b> | 9. API Well No.<br><b>30-045-35286</b>                                    |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)<br><b>Surface Unit G (SWNE), 1433' FNL &amp; 2358' FEL, Sec. 03, T29N, R10W</b> |                                                            | 10. Field and Pool or Exploratory Area<br><b>Blanco MV / Basin Dakota</b> |
|                                                                                                                                                        |                                                            | 11. Country or Parish, State<br><b>San Juan New Mexico</b>                |

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 |
|                                                       | <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <b>Spud Report</b>                        |
|                                                       | <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 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat 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.)

**1107/14 MIRU MOTE 208. Spud w/ 12 1/4" bit @ 07:45 hrs on 11/07/14. Drilled ahead to 326'. RIH w/ 10 jts, 9 5/8" H-40, 32.3#, ST&C csg set @ 321'. RU to cmt. Pre-flushed 5 bbls & circ 35 bbls FW spacer, pumped 101sx(163cf-29bbls=1.61yld), Type I-II cmt w/ 20% Fly-ash. Dropped plug & displaced w/ 21bbls FW. Circ 8 bbls good cmt to surface. RD cmt. WOC. ND BOPE. RD RR @ 15:15 on 11/07/14.**

**PT will be conducted by Drilling Rig. Results will appear on next report. ✓**

OIL CONS. DIV DIST. 3

NOV 18 2014

ACCEPTED FOR RECORD

NOV 13 2014

FARMINGTON FIELD OFFICE  
BY: *William Tambelkon*

|                                                                                                          |                       |                      |
|----------------------------------------------------------------------------------------------------------|-----------------------|----------------------|
| 14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)<br><b>Arleen White</b> | Staff Regulatory Tech |                      |
| Signature <i>Arleen White</i>                                                                            | Title                 | Date <i>11/11/14</i> |

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 the jurisdiction of such department or agency.