

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

MAY 19 2015

FORM APPROVED
OMB NO. 1004-0135
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.

Farmington Field Office

5. Lease Serial No.
NMSF079938

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.
SRM1535

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		8. Well Name and No. JONES COM 4
2. Name of Operator BP AMERICA PRODUCTION CO. Contact: TOYA COLVIN E-Mail: Toya.Colvin@bp.com		9. API Well No. 30-045-24430-00-C1
3a. Address 200 ENERGY CT. FARMINGTON, NM 87401	3b. Phone No. (include area code) Ph: 281-366-7148	10. Field and Pool, or Exploratory BASIN DAKOTA BLANCO MESAVERDE
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 30 T29N R8W NESW 1580FSL 1250FWL 36.693770 N Lat, 107.719390 W Lon		11. County or Parish, and State SAN JUAN COUNTY, NM

12. CHECK 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 type="checkbox"/> Other
	<input type="checkbox"/> Change Plans <input type="checkbox"/> Plug and Abandon <input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Convert to Injection <input checked="" 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 shall 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 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

Due to the subject well loading water and after several swab attempts, BP submitted Notice of Intent to Plug Back the subject well 05/14/2015 WIS# 301725. BP has requested to cancel permit WIS# 301725, and re-submit the NOI with an updated procedure including wellbore diagrams.

OIL CONS. DIV DIST. 3

MAY 26 2015

Please see the attached updated procedure including wellbore diagrams.

In accordance with NMOCD Pit Rule 19.15.17.9 NMAC, BP America Production Company will use a closed-loop system during operations. **BLM'S APPROVAL OR ACCEPTANCE OF THIS ACTION DOES NOT RELIEVE THE LESSEE AND OPERATOR FROM OBTAINING ANY OTHER AUTHORIZATION REQUIRED FOR OPERATIONS ON FEDERAL AND INDIAN LANDS**

CA SRM1535 **Notify NMOCD 24 hrs prior to beginning operations** **SEE ATTACHED FOR CONDITIONS OF APPROVAL**

14. I hereby certify that the foregoing is true and correct.

Electronic Submission #302248 verified by the BLM Well Information System For BP AMERICA PRODUCTION CO., sent to the Farmington Committed to AFMSS for processing by TROY SALYERS on 05/20/2015 (15TLS0244SE)

Name (Printed/Typed) TOYA COLVIN	Title REGULATORY ANALYST
Signature (Electronic Submission)	Date 05/19/2015

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>TROY SALYERS</u>	Title <u>PETROLEUM ENGINEER</u>	Date <u>05/20/2015</u>
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 Farmington		

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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

NMOCD

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Jones Com 004

API # 30-045-24430-00

Location: J SEC. 30, T29NN, R08WW

San Juan County, New Mexico

Reason/Background for Job

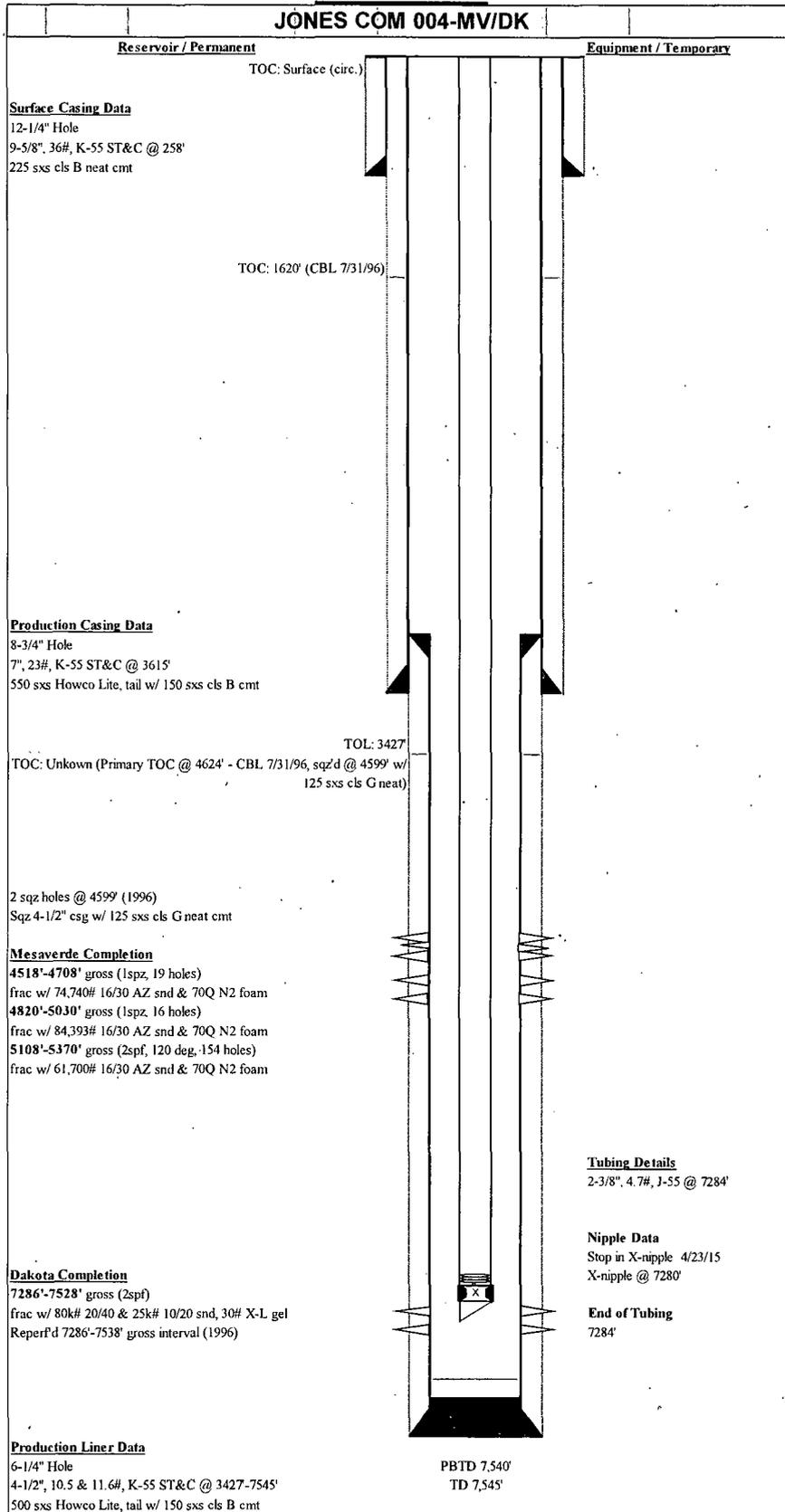
The well is loading water, after several swab operation the well requires to P&A DK zone. Set CIBP above DK pump 35' of cement and RIH with tubing to return the well to production.

Basic job procedure

1. Pull tubing
2. RIH to set CIBP @ +/- 7,236'
3. Pump 35' cement above CIBP (TOC ~ 7,201') *See COA*
4. Run tubing
5. Return well to production

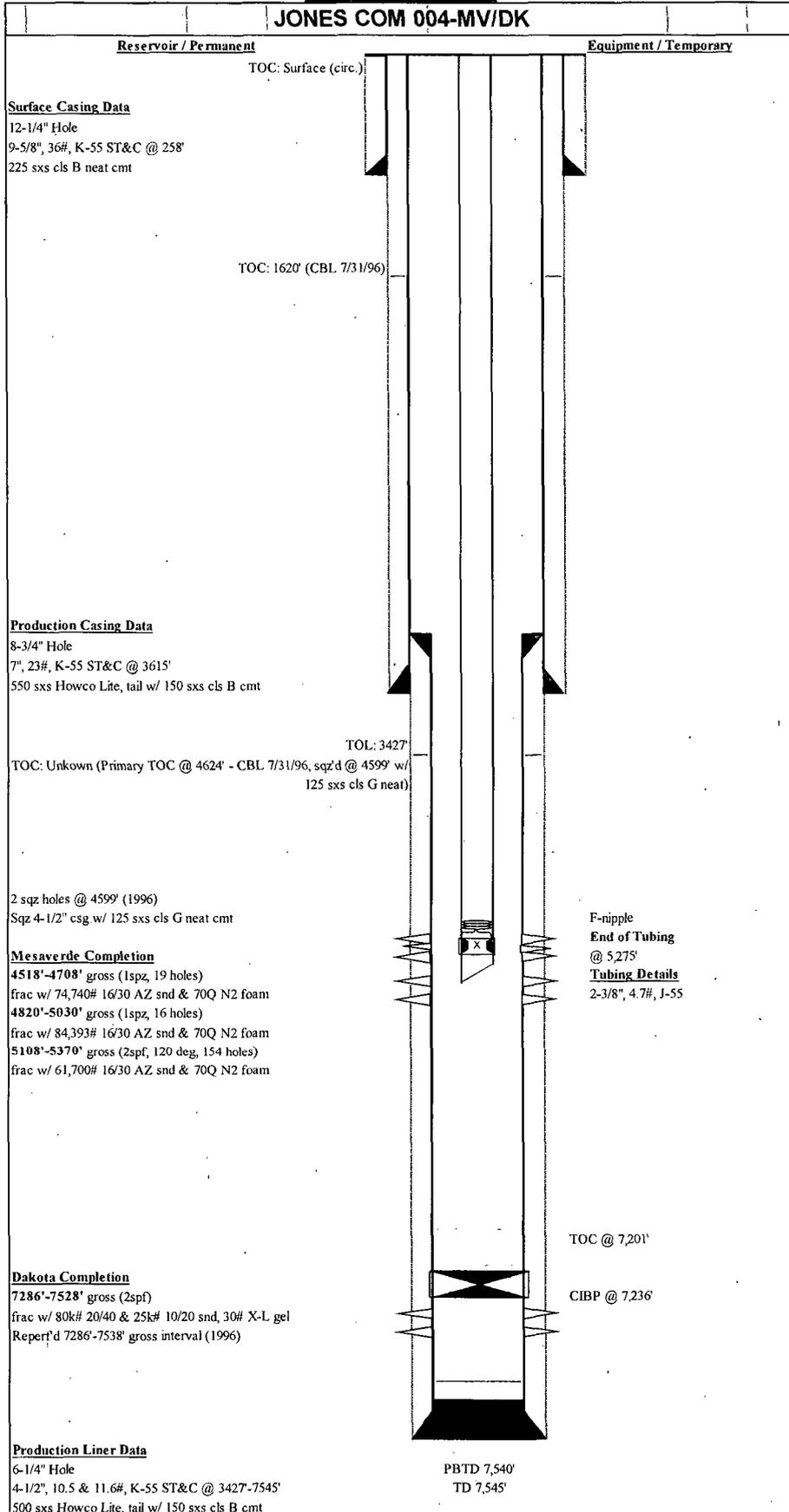
Primary TOC @ 4624' - CBL 7/31/96

Current WBD



Proposed WBD

JONES COM 004-MV/DK



BLM CONDITIONS OF APPROVAL

CASING REPAIR, WORKOVER AND RECOMPLETION OPERATIONS:

1. If casing repair operations are needed, obtain prior approval from this office before commencing repairs. If a CBL or other logs are run, provide this office with a copy.
2. After any casing repair operations, test cement squeeze to a minimum of 500# for 30 minutes with no more than 10 % pressure fall off in the 30 minute test period. Provide test chart with your subsequent report of operations
3. A properly functioning BOP and related equipment must be installed prior to commencing workover, casing repair, and/or recompletion operations.
4. Contact this office at (505) 564-7750 prior to conducting any cementing operations:

SPECIAL STIPULATIONS:

1. **Pits will be fenced during work-over operation.**
2. **All disturbance will be kept on existing pad.**
3. **All pits will be pulled and closed immediately upon completion of the recompletion and work-over activities.**
4. **Pits will be lined with an impervious material at least 12 mils thick.**
5. **Set a minimum 100 ft. plug above CIBP at 7236 ft. Adjust cement volume accordingly.**