

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT



**CONFIDENTIAL**

**RECEIVED**  
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. **JUL 0 2015**  
NMNM 100807  
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)  
505-716-1938

4. Location of Well (Footage, Sec., T.R.M., or Survey Description)  
SHL: 1348' FNL and 438' FWL Section 14, T24N, R10W  
BHL: 2228' FNL and 292' FEL Section 16, T24N, R10W

7. If Unit of CA/Agreement, Name and/or No.  
R-13857-A

8. Well Name and No.  
Pinon Unit D14-2410 02H

9. API Well No.  
30-045-35530

10. Field and Pool or Exploratory Area  
Pinon Unit HZ (Oil)

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 <u>First Oil Sales</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.)

First oil sales occurred on the Pinon Unit D14-2410 02H on 04/18/2015, 62.64 BBLS.

**OIL CONS. DIV DIST. 3**

**JUL 10 2015**

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

Title Permit Technician

Signature *[Handwritten Signature]* Date 07/03/2015

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by \_\_\_\_\_ Title \_\_\_\_\_ Date \_\_\_\_\_

Office \_\_\_\_\_

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.

**ACCEPTED FOR RECORD**

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)

**JUL 08 2015**  
FARMINGTON FIELD OFFICE  
BY: *[Signature]*

**NMOCDPV**