

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RECEIVED

JAN 28 2016

FORM APPROVED
OMB No. 1004-0137
Expires: March 31, 2007

Farmington Field Office
Bureau of Land Management

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.
NMSF-078768

6. If Indian, Allottee or Tribe Name

SUBMIT IN TRIPLICATE - Other instructions on page 2.

7. If Unit of CA/Agreement, Name and/or No.
NMNM78407E

1. Type of Well

Oil Well Gas Well Other

8. Well Name and No.
Rosa Unit #2 SWD

2. Name of Operator

WPX Energy Production Company, LLC

9. API Well No.
30-039-30812

3a. Address

PO Box 640 Aztec, NM 87410

3b. Phone No. (include area code)

505-333-1822

10. Field and Pool or Exploratory Area

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

SHL: 2,460' FNL & 2,095' FWL sec 25, T31N, R5W
BHL: 2,414' FNL & 1,951' FWL, sec 25, T31N, R5W

11. Country or Parish, State
Rio Arriba, NM

12. CHECK THE 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 checked="" type="checkbox"/> Other <u>Repair Casing Leak- Squeeze</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.)

1/26/16- WPX received verbal approval to proceed with re-squeezing from OCD (Monica) and BLM (William). Attached is the updated procedure.

**SEE ATTACHED FOR
CONDITIONS OF APPROVAL**

**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**

OIL CONS. DIV DIST. 3

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

Name (Printed/Typed)

Lacey Granillo

Title Permitting Tech III

FEB 03 2016

Signature

Date 1/27/16

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Abdelgadir Elmadani

Title

PE

Date

1/29/16

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

FFO

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)

NMOCD AX

Rosa Unit SWD #2 Casing Leak Repair Procedure

Casing Leak Repair Procedure (Old Squeeze Perfs 8,010'-8,020')

1. MIRU pulling unit. ND wellhead. NU BOP. Unload 2-7/8 EU 8rd N-80 or better workstring.
2. MU packer w/ tailpipe and retrievable bridge plug for 7" 29# L-80 LTC casing on 2-7/8" workstring. TIH with same. Set RBP @ $\pm 8,120'$. POH and LD one joint, set packer and test RBP to 1000 psi. Release packer. Leave pressure on casing and establish injection rate/pressure into old squeeze perfs at 8,010'-8,020'. Spot (or dump bail) 2 sacks of sand ($\pm 10'$) on top of RBP. Allow sufficient time for sand to fall.
3. TIH and spot 50 sx of cement across perforations per cementing company recommendation. POH to get packer @ $\pm 7,910'$ adjusting setting depth as needed to keep tailpipe out of cement. Reverse circulate tubing volume plus sufficient volume to ensure there is no cement around packer or tailpipe. Set packer and apply 500 psi to casing. Cement squeeze old perforations 8,010'-8,020', staging as needed to get a successful squeeze. Wait on cement.
4. Release and TOH with packer. TIH with bit and casing scraper, drill out cement. Test casing to 500 psi. TOH with bit and casing scraper.
5. Make up RBP retrieving tool on workstring. TIH with retrieving tool, circulate sand off RBP and continue to circulate until well is clean. Retrieve RBP and TOH laying down workstring.
6. MU nickel-plated injection packer and TIH, picking up 3-1/2" plastic coated injection tubing. Set packer at $\pm 8,282'$. Test casing above packer to 500 psi.
7. Notify BLM/NMOCD of MIT plan 24 hours in advance in the event they want to witness.
8. Load casing and perform MIT per BLM/NMOCD requirements. ND BOP. NU wellhead for injection. Return to injection. Turn well over to production. RDMO pulling unit.

BLM CONDITION 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.**