

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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.*

**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	5. Lease Serial No. NMNM16470
2. Name of Operator RED WILLOW PRODUCTION CO Contact: SHELLY COWDEN E-Mail: scowden@rwpc.us	6. If Indian, Allottee or Tribe Name
3a. Address 14933 HIGHWAY 172 PO BOX 369 IGNACIO, CO 81137	7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 970-563-5194	8. Well Name and No. BENGAL A 2
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 1 T26N R12W NESW	9. API Well No. 30-045-21183
	10. Field and Pool, or Exploratory GALLEGOS FRUITLAND
	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 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 checked="" type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Final Abandonment Notice
	<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 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.)

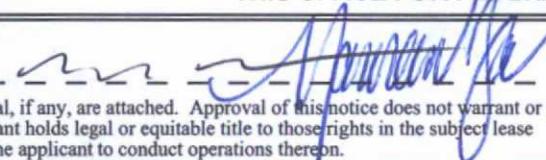
Request for Final Inspection and Release.

OIL CONS. DIV DIST. 3

AUG 19 2016

14. I hereby certify that the foregoing is true and correct. <b>Electronic Submission #345745 verified by the BLM Well Information System For RED WILLOW PRODUCTION CO, sent to the Farmington</b>	
Name (Printed/Typed) SHELLY COWDEN	Title AGENT
Signature (Electronic Submission)	Date 07/26/2016

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By 	Title MDS AFM	Date 7/26/16
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.

**\*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\* OPERATOR-SUBMITTED \*\***

NMOCD

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## Final Reclamation Inspection/Monitoring - Environmental

Case #: _____ Lease #: <b>NMNM16470</b> Operator: <b>RUNNING HORSE</b> Present: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Multi-Well Location Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Well Name: <b>BENGAL A 2</b> Well #: _____ API #: <b>30-045-21183</b> Well Status: <b>P&amp;A</b> Plugged Date: _____	
Twn: <b>26N</b> Rng: <b>12W</b> Sec: <b>1</b> Qtr: <b>NESW</b> N/S Foot: _____ E/W Foot: _____	County: <b>SAN JUAN</b> State: <b>NM</b> Lat: _____ Long: _____	Facility ID: _____ Facility Name: _____ H2S: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	
Surface Owner: <b>BIA</b> Present: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Inspection Activity: <b>ES/ SA</b>	
Office Time: <b>.5</b>	Travel Time: <b>.10</b>	Inspection Time: <b>.25</b>	Trips: <b>1</b>
Inspection Open Date: <b>4/20/2016</b>	Inspection Close Date: <b>4/20/2016</b>	Inspector: <b>Bullock</b>	

Inspected: Well/Facility Location ; Road ; Pipeline ; Power Line ; Other

Inspection Items	Met	Not Met	N/A	Order/INC
1. All Facilities Removed for Final Reclamation (Including cement, surface and shallow pipes, risers, markers, signs, fences, culverts, gates, cattleguards, trash, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
2. Surfacing Material Removed from Location and Road	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
3. Free of Oil or Salt-Contaminated Soil	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
4. Compacted Areas Ripped/Disked (Locations, Roads, etc.)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
5. All Original Disturbance Areas Recontoured Back to Original Contour	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
6. Adequate Topsoil Replaced	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
7. Seeded Drill Seeded <input type="checkbox"/> Broadcast Seeded <input type="checkbox"/> Other	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
8. Adequate Surface Roughness	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
9. Erosion and Runoff Controlled Methods	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
10. Mulch Type	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
11. Reclamation Fence: Follow-up needed to ensure fence removal? Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
12. Dry-hole Marker: Surface Monumented <input type="checkbox"/> Subsurface Monumented (preferred) <input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
13. Free of Noxious or Invasive Weeds Treatment Needed Yes <input type="checkbox"/> No <input type="checkbox"/> Species Present	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
14. Revegetation Success & Desired Species Density/Cover Measurement and % Species Types and % Reference Site Density/Cover Measurement and % Reference Site Species Types and % Transect Sheets Completed Yes <input type="checkbox"/> No <input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
15. Overall Site Stability (Wind & Water Erosion, Subsidence, Vegetation)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
16. Split Estate: Surface Owner Consultation/Concurrence	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
17. Other: (Describe)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
<b>Summary:</b> <b>All Reclamation Work According to the Approved Reclamation Plan &amp; BLM Policy and Successful</b>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/>
Final Reclamation Approvable - Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>				

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Comments, Inspection/Monitoring Results, and Additional Actions Necessary:

- FAN APPROVED 04/20/2016

- FACILITIES BELONG TO ANOTHER OPERATOR AND ARE STILL IN USE

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Original Disturbance Acres/Well:

(including location, roads, and pipelines):

Meets Final Reclamation Standards Acres/Well:

Follow-up Requirements:  
Choose an item.

Correct problem by: [Click here](#)  
to enter a date.

Next Inspection date: [Click](#)  
here to enter a date.

Date AFMSS updated: [Click](#)  
here to enter a date.

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Order/INC No.

The Privacy Act of 1974 and the regulations in 43 CFR 2.48(d) require that you be furnished the following information.

**Authority:** 30 U.S.C. 181 et seq.; 43 CFR 3160; Onshore Oil and Gas Order No. 1.

**Principal purpose:** The BLM uses this information to document and track compliance with the terms of a Federal permit and to contact permittees and affected parties.

**Routine uses:** (1) Document and track compliance with permit conditions. (2) Gather contact information for permittees and parties affected by the permit, for example, split estate surface owners. (3) Track monitoring data. (4) Information from the record and/or the record will be transferred to appropriate Federal, State, or local agencies when relevant to civil, criminal, or regulatory investigations or prosecutions.

**Effect of not providing information:** Disclosure of the information is voluntary; however, failure to provide the requested information may impede individual participation.

# Final Reclamation ES – Photo Log

PHOTO NUMBER	PHOTO INFORMATION
1.	DHM
2.	DHM
3.	DHM
4.	DHM
5.	FACILTIES
6.	VEGETATION
7.	
8.	

Photo 1

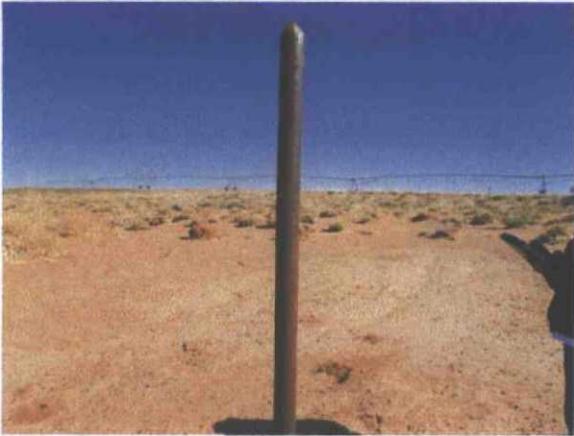


Photo 2



Photo 3



Photo 4

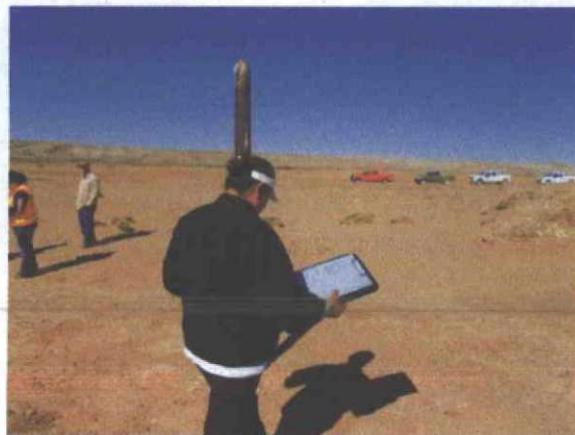


Photo 5



Photo 6



Photo 7

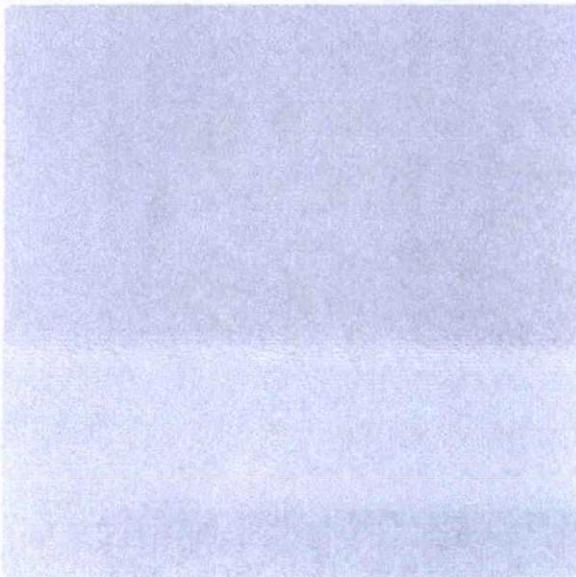


Photo 8

