Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

United States any false, fictitious or fraudulent statements.

OIL CONS. DIV DIST. 3

AUG 28 2017

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

1. Type of Well:		5. Lease Number:					
Gas		SF-077107B					
2. Name of Operator: HILCORP ENERGY COMPANY 3. Address and Phone No. of Operator: P.O. Box 4700 Farmington, NM 87499 505-599-3400		 6. If Indian, allottee or Tribe Name: 7. Unit Agreement Name: 8. Well Name and Number: MICHENER LS 2 					
				4. Location of Well, Footage, Sec. T, R, U:		9. API Well No.	
				FOOTAGE: 1453' FNL & 1850' FWL		3004507493	
				S: 15 T: 028N R: 009W U: F		10. Field and Pool:	
						PC - AZTEC::PICTURED CLIFFS	
		11. County and State:					
		SAN JUAN, NM					
12. CHECK APPROPRIATE BOX TO INDICA	TE NATURE OF NOTICE, REPO	ORT, OTHER DATA					
Notice of Intent	Recompletion	Change of Plan	S				
X Subsequent Report	Plugging Back	New Construction	on				
Final Abandonment Casing Repair		Non-Routine Fracturing					
Abandonment	Altering Casing	Water Shut Off					
	X Other- Re-Delivery	Conversion to Ir	njection				
This well was re-delivered on 8/3/2017 a Notes: WELL WAS HUT IN FOR M		trained hydrocarbons.	TO PRODUCTION. RECEIVED				
TP: 0 CP: 99	5 Initial MCF: 6	PTED FOR RECORD	AUG 2 4 2017				
Meter No.: 71365							
Gas Co.: ENT	L	TIG 2 5 2017	Farmington Field Office				
Proj Type.: REDELIVERY	FARM! BY:	NGTON FIELD OFFICE William Tambekou	Bureau of Land Managemen				
14. I Hereby certify that the foregoing is tru	e and correct.						
Signed Langua Kolan	Title: Operations/F	Regulatory Tech. Date: 8/23/2	2017				
(This Space for Federal or State Office Use)							
APPROVED BY:	Title:	Date:					
CONDITION OF APPROVAL, if any:							
Title 18 U.S.C. Section 1001, makes it a crime	for any person knowingly and w	illfully to make to any department o	r agency of the				

NMOCD V