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.

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

1. Type of Well:

Gas

2. Name of Operator:

Hilcorp Energy Company

3. Address and Phone No. of Operator:

P.O. Box 4700 Farmington, NM 87499

505-599-3400

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 155' FSL & 2615' FEL

S: 22   T: 028N   R: 006W   U: O

5. Lease Number:

SF-079193

6. If Indian, allottee or Tribe Name:

.

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 28-6 UNIT 119E

9. API Well No.

3003929354

10. Field and Pool:

DK - BASIN::DAKOTA
MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

	Notice of Intent	Recompletion	Change of Plans
X	Subsequent Report	Plugging Back	New Construction
	Final Abandonment	Casing Repair	Non-Routine Fracturing
	Abandonment	Altering Casing	Water Shut Off
		X Other- Re-Delivery	Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 3/20/2018 and produced natural gas and entrained hydrocarbons.

Notes: THIS WELL WAS RECOMPLETED TO THE MESAVERDE & COMMINGLED WITH EXISTING DAKOTA.

ACCEPTED FOR RECORD

TP: 301   CP: 481   Initial MCF: 658

APR 0 9 2018

Meter No.: 8379501

NMOCD

Gas Co.: WFC

APR 1 2 2018

Proj Type.: RECOMPLETE

DISTRICT III

FARMINGTON FIELD OFFICE
By: _William Tambeko_

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

Signed _Tammy Jones_   Title: Operations/Regulatory Tech - Sr.   Date: 4/5/2018
Tammy Jones

(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 willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements.

NMOCD