

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

RECEIVED

APR 06 2018

Farmington Field Office  
Bureau of Land Management

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: 90' FNL & 305' FEL

S: 31 T: 028N R: 005W U: A

5. Lease Number:

NMSF-079521-A

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

SAN JUAN 28-5 UNIT 62E

9. API Well No.

3003930154

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

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
	<input checked="" type="checkbox"/> Other- Re-Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 3/21/2018 and produced natural gas and entrained hydrocarbons.

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

ACCEPTED FOR RECORD

TP: 516 CP: 573 Initial MCF: 536

APR 09 2018

Meter No.: 8348101

NMOCD

Gas Co.: WFC

APR 12 2018

FARMINGTON FIELD OFFICE

Proj Type.: RECOMPLETE

By: *William Tambekou*

DISTRICT III

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

Signed

*Tammy Jones*  
Tammy Jones

Title: Operations/Regulatory Tech - Sr.

Date: 4/5/2018

(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 PV