Form 3160-5 (April 2004)

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 re-enter an

FORM A	PPROV	ΈD
OMB NO	1004-0	0137
Expires Ma	rch 31	200

5	Lease	Serial	No.

SF-	07	77	97	<u> 72</u>	

6. If Indian, Allottee or Tribe Name

abandoned well. Use For	n 3160-3 (APD) for	such proposals.			
SUBMIT IN TRIPLICATE -	Other instructions	on reverse side 5	PM 2: 54	7. If Unit or C	CA/Agreement, Name and/or N
1 Type of Well OII Well X Gas Well Other 2. Name of Operator		RECEIVI DLM 210 PARHING		8. Well Name Richardso	
Energen Resources Corporation				9 API Well N	Jo.
3a Address		3b Phone No. (include are	ea code)	300452615	
2198 Bloomfield Highway, Farmington	. NM 87401	(505) 325-680	0		Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R, M, or Survey)	Description)			Basin Dak	ota
Sec 11 T27N R13W 1520' FSL, 1520' F 36.58541 N Lat, 108.19199 W Long	WL		,	•	or Parish, State
12. CHECK APPROPRIATE	POY(ES) TO IND	JCATE NATURE OF	IOTICE DED	San Juan	NM NED DATA
	I BOX(ES) TO IND			JKI, OK OI	THER DATA
TYPE OF SUBMISSION		TYF	PE OF ACTION		
X Notice of Intent	Acidize Alter Casing	Deepen Fracture Treat	Production Reclamatio	(Start/Resume)	Water Shut-Off Well Integrity
Subsequent Report	X Casing Repair	New Construction	Recomplete	e	Other
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporard	y Abandon	
	Convert to Injection	n Plug Back	Water Disp	osal	
following completion of the involved operations, testing has been completed. Final Abandonment I determined that the final site is ready for final inspe We suspect that this well has devicted follows: 1. MIRU. ND wellhead. NU BOP. 2. TOOH w/ 2-3/8" tbg. 3. TIH w/ 4-1/2" RBP and set @ 50/4. TIH w/ 4-1/2" packer to isolate 5. Squeeze casing leak. 6. Drill out cement and test case 7. TOOH w/ RBP. 8. TIH w/ 2-3/8" production tbg a 9. ND BOP. NU wellhead. Return to	Notices shall be filed on ction.) reloped a casing 000'. Test plug re csg leak. Cer ung to 500 psi. and clean out to	ly after all requirements, income leak. We plan to to 500 psi. Dump ment will be determined.	isolate and	n, have been colored to the colored	ompleted, and the operator ha
14 I hereby certify that the foregoing is true and correct Name (Printed/Typed) Kirt Snyder		Title Distri	ct Engineer		
		Date 8/15/200)7		
THIS	S SPACE FOR FED	ERAL OR STATE OF	FICE USE		
Approved by Original Signed: Steph Conditions of approval, if any, are attached Approval of certify that the applicant holds legal or equitable title to which would entitle the applicant to conduct operations to	of this notice does not we those rights in the subj	Title arrant or Office ect lease		I	Date AUG 1.7 2007
out the applicant to conduct operations t		I			