

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0135
Expires July 31, 1996

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
☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator
Louis Dreyfus Natural Gas Corp.

3a. Address 14000 Quail Springs Parkway
Suite 600, Oklahoma City, OK 73134
3b. Phone No. (include area code) (405) 749-5287

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

810' FNL & 1665' FEL, NW/4 NE/4 Sec. 12-27N-12W

5. Lease Serial No.
NMSF-079116

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.

Hancock 8R

9. API Well No.
30-045-21832

10. Field and Pool, or Exploratory Area
West Kutz, P.C.

11. County or Parish, State
San Juan, New Mexico

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input type="checkbox"/> Other _____
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input checked="" 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 recompleat 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 recompleat 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.)

Louis Dreyfus Natural Gas Corp. requests a one (1) year shut in status on this well. The well was recompleted in the U. Pictured Cliffs in January, 1998. The recompleat on the Hancock 8R has not proved economic, although recompleatons of this type have been successful on other wells in the area.

Louis Dreyfus Natural Gas Corp. requests a one (1) year period to evaluate the results to determine if failure is due to mechanical error and, if so, whether the reserves are adequate to justify the expense of another workover.

THIS APPROVAL EXPIRES MAR 01 2000

14. I hereby certify that the foregoing is true and correct
Name (Printed/Typed)

Terry D. Bryant

Signature

Title

Regulatory Technician

Date

1/27/99

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

/s/ Duane W. Spencer

Team Lead, Petroleum Management

Date

FEB 24 1999

Office

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.

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 or representations as to any matter within its jurisdiction.

(Instructions on reverse)

NMOCD