F 3rm 3160-5 (August, 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

| FORM A | PPROVED |
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| OMB No. | 1004-0135 |

| OMB No. 1004-0135 | / |
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| Expires: November 30, 2000 |) |

| 5. Le | ase Se | eri |
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| 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 | | 5. Lease Serial No. | | |
|---|-----------------|---|--|--|
| | | SF-079116 | | |
| | | 6. If Indian, Allottee or Tribe Name | | |
| | | 7. If Unit or CA/Agreement, Name and/or No. | | |
| 1. Type of Well Oil Well Gas Well Other | | 8. Well Name and No. | | |
| 2. Name of Operator | 735 | Hancock 32-1 / # 30 | | |
| DOMINION OW AHOMA TEVAS ESD INC | | 9. API Well No. | | |
| DOMINION OKLAHOMA TEXAS E&P, INC. 3a. Address Suite 600 3b. Phone No. (inclu | de area code) | 30-045-28837 | | |
| 14000 QUAIL SPGS PKWY, OKLA CITY, OK 73134 405-749-130 | - | 10. Field and Pool, or Exploratory Area | | |
| 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) | | 1 | | |
| | | Basin Fruitland Coal | | |
| 4 000 ENT 9 4 700 EET (CW/NE) Coo 4 07N 40W | | 11. County or Parish, State | | |
| 1860' FNL & 1700' FEL, (SW NE) Sec. 1-27N-12W | | San Juan, NM | | |
| 12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF N | OTICE, REP | ORT OR OTHER DATA | | |
| TYPE OF SUBMISSION TYPE | E OF ACTION | N . | | |
| Notice of Intent Acidize Deepen | Production (S | Start/Resume) Water Shut-Off | | |
| Altering Casing Fracture Treat | Reclamation | Well Integrity | | |
| Subsequent Report Casing Repair New Construction | Recomplete | Other | | |
| Change Plans X Plug and Abandon | Temporarily A | Abandon | | |
| X Final Abandonment Notice Convert to Injection Plug Back | Water Dispos | sal | | |
| 8-9-02 Pumped 240 sks Class B cement @ 15.6 ppg and 1.18 yie (PBTD 1,907). Cut off wellhead and welded dry hole marker. Job w/Farmington BLM office. | | • | | |
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| | | 옷이 꾸게 | | |
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| 14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) | 1 | - - | | |
| Carla Christian | Title | Regulatory Specialist | | |
| Signature Carlo Christian | Date | 8/22/2002 | | |
| THIS SPACE FOR FEDERAL OR STA | TE OFFICE | USE | | |
| Approved by | Title | Date | | |
| 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 | Office | ACCEPTED FOR RECORD | | |
| which would entitle the applicant to conduct operations thereon. | | ALIC O COMO | | |
| Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, makes it a crime for any pe | I SOU KNOWINGIY | and winding to make to appropartment or agency of the | | |

United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

| Aim | 10.0.1 | J. 110E |
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| BY | own | . |
| | Park No. | M L |