

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:

ConocoPhillips

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

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

FOOTAGE: 1288' FNL & 1808' FEL

S: 21 T: 026N R: 008W U: B

5. Lease Number:

SF-078384

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

DK-NMNM96752 & MV-NMNM112689

8. Well Name and Number:

HODGES 14E

9. API Well No.

3004535261

RCVD DEC 26 '12
OIL CONS. DIV.
DIST. 3

10. Field and Pool:

DK - BASIN::DAKOTA
MC - BASIN::MANCOS

11. County and State:

SAN JUAN, 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-First Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was first delivered on 11/13/2012 and produced natural gas and entrained hydrocarbons.

Notes: CIBP HAS BEEN REMOVED FROM OVER THE DK. 1st DELIVERED THE DK THROUGH GAS RECOVERY COMPLETION ON 11/13/12. FINISHED THE GAS RECOVERY COMPLETION 11/16/12. WELL IS NOW PRODUCING AS A MC/DK DOWN HOLE COMMINGLE AFTER PRODUCING AS A STANDALONE MC FOR APPROXIMATELY 4 MONTHS.

TP: CP: Initial MCF: 619

Meter No.: 80111

Gas Co.: WFC

Proj Type.: GAS RECOVERY COMPLETION

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

Signed

Tamra Sessions
Tamra Sessions

Title: Staff Regulatory Tech.

Date: 11/30/2012

(This Space for Federal or State Office Use)

APPROVED BY:

Title:

Date:

CONDITION OF APPROVAL, if any:

ACCEPTED FOR RECORD

DEC 11 2012

FARMINGTON FIELD OFFICE

BY

NMOC D ca