| <b>*</b> .                        |   |                                   | Ceive                     | $\square$                        |  |
|-----------------------------------|---|-----------------------------------|---------------------------|----------------------------------|--|
| orm 3160-5<br>(August 2007)       | UNITED STAT<br>DEPARTMENT OF THI<br>BUREAU OF LAND MA   | E INTERIOR <b>F</b>               | EB 04 2013                | OME<br>Expir                     | M APPROVED<br>8 No. 1004-0137<br>es: July 31, 2010 |
|                                   |   | Farmi                             | ngton Field DE            | seßerial No.                     | SF-078835  |
|                                   | SUNDRY NOTICES AND REP  | ORTS ON WELLS                     | 6. If It                  | ndian, Allottee or Tril          | · · · · · · · · · · · · · · · ·                    |
| Do no                             | ot use this form for proposals<br>oned well. Use Form 3160-3 (/   | to drill or to re-er              | nter an 🔰                 |                                  |  |
|                                   | SUBMIT IN TRIPLICATE - Other in   |                                   |                           | nit of CA/Agreement              | Name and/or No                                     |
| . Type of Well                    |   |                                   |                           | -                                | an Juan 28-7 Unit                                  |
| Oil Well                          | X Gas Well Other  |                                   |                           |                                  | uan 28-7 Unit 254                                  |
| . Name of Operator                | ConocoPhillips Comp   | anv                               | 9. AP                     | ( Well No.<br>3(                 | )-039-21680  |
| a. Address                        | · · · · · ·   | 3b. Phone No. (include            |                           | eld and Pool or Explo            | -  |
| PO Box 4289, Farm                 | c., T.,R.,M., or Survey Description)  | (505) 326                         |                           | Basin<br>ountry or Parish, State | Dakota/Blanco MV                                   |
|                                   | SWSW), 850' FSL & 800' FWL  | , Sec. 6, T27N, R7                |                           | Rio Arriba                       | New Mexico   |
| 12. CH                            | ECK THE APPROPRIATE BOX(ES  | ) TO INDICATE NAT                 | FURE OF NOTICE,           | REPORT OR OT                     | HER DATA   |
| TYPE OF SUBMISSIC                 | . NC  | Т                                 | YPE OF ACTION             | . <u>.</u>                       | ,  |
| X Notice of Intent                | Acidize   | Deepen                            |                           | on (Start/Resume)                | Water Shut-Off                                     |
|                                   | Alter Casing  | Fracture Treat                    | Reclama                   |                                  | Well Integrity                                     |
| Subsequent Report                 | Casing Repair   | New Construction Plug and Abandor |                           | lete<br>arily Abandon            | Other  |
| Final Abandonment Noti            |   | Plug Back                         | Water D                   | -                                | ······   |
| The MV Plat and re                | plete the subject well in the N<br>completion procedure are att   | ached.                            | · .                       |                                  | ne Dakota per DHC 2446AZ.                          |
| * prior to p                      | enfs, submit CAL  | to Agenci                         | es the Revie              |                                  | RCVD FEB 7'13<br>OIL CONS. DIV.                    |
|                                   |   |                                   |                           |                                  | 0151.3   |
|                                   |   | . 4                               |                           |                                  |  |
|                                   |   | · . ·                             |                           | ÷                                |  |
| 4. I hereby certify that the fore | going is true and correct. Name (Printed/T)   | ped)                              | · ·                       |                                  |  |
|                                   | DENISE JOURNEY  | Title                             |                           | Regulatory Teo                   | chnician   |
| Signature Denus                   | e Journey   | Date                              |                           | 2/1/201                          | 13 ····  |
|                                   | THIS SPACE F  | OR FEDERAL OR                     | STATE OFFICE              | USE                              |  |
| Approved by<br>Origin             | al Signed: Stephen Mason  |                                   | Title                     |                                  | FEB 0 5 2013                                       |
|                                   | re attached. Approval of this notice does no<br>equitable title to those rights in the subject l<br>operations thereon. |                                   | Office                    |                                  |  |
|                                   |   |                                   |                           |                                  |  |
| iaise, neurous or nauquient stat  | d Title 43 U.S.C. Section 1212, make it a cr  |                                   | ingly and willfully to ma | ke to any department             | or agency of the United States any                 |
| (Instruction on page 2)           | d Title 43 U.S.C. Section 1212, make it a cr<br>tements or representations as to any matter v                           | within its jurisdiction.          |                           | ke to any department             | or agency of the United States any                 |
| Instruction on page 2)            |   |                                   |                           | ke to any department             | or agency of the United States any                 |

21 - 27

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District I 1625 N. French Dr., Hobbs, NM 88240 Phone: (575) 393-6161 Fax: (575) 393-0720 District II 811 S. First St., Artesia, NM 88210 Phone: (575) 748-1283 Fax: (575) 748-9720 District III 1000 Rio Brazos Rd., Aztec, NM 87410 Phone: (505) 334-6178 Fax: (505) 334-6170 District IV 1220 S. St Francis Dr., Santa Fe, NM 87505 Phone: (505) 476-3470 Fax: (505) 476-3462 State of New Mexico Energy, Minerals and Natural Resources Oil Conservation Division 1220 S. St Francis Dr. Santa Fe, NM 87505 ureau of Land Managemen. Form C-102 August 1, 2011 Permit 161413 NSC

#### WELL LOCATION AND ACREAGE DEDICATION PLAT

| 1. API Number             | 2. Pool Code |  | Pool Name           |  |  |
|---------------------------|--------------|--|---------------------|--|--|
| <b>30–039–21680</b>       | 72319        |  | ERDE (PRORATED GAS) |  |  |
| 4. Property Code<br>31739 | •            | 5. Property Name6. WellSAN JUAN 28 7 UNIT254 |                     |  |  |
| 7. OGRID No.              | 8. Operat    |  | 9. Elevation        |  |  |
| 217817                    | CONOCOPHILL  |  | 6844                |  |  |

|          |         |          |       | 10. 1   | Surface Loc |          |           |          |            |
|----------|---------|----------|-------|---------|-------------|----------|-----------|----------|------------|
| UL - Lot | Section | Township | Range | Lot Idn | Feet From   | N/S Line | Feet From | E/W Line | County     |
| М        | 6       | 27N      | 07W   |         | 850         | S        | 800       | W        | RIO ARRIBA |

с т. . . .

# 11. Bottom Hole Location If Different From Surface

|   | UL - Lot | Section                 | То | ownship | Range           | Lot | [dn | Feet From         | N/S Li | ine | Feet From | E/W Line               | County                      |  |
|---|----------|-------------------------|----|---------|-----------------|-----|-----|-------------------|--------|-----|-----------|------------------------|-----------------------------|--|
|   |          | cated Acres<br>0.00 W 2 |    | 13. J   | Joint or Infill |     | 14  | . Consolidation ( | Code   |     |           | 15. Order No <b>R(</b> | ND FEB 7:13<br>L CONS. DIV. |  |
| 1 | 32       | 0.00 W/2                |    |         |                 |     |     |                   |        |     |           |                        | NICT 9                      |  |

## NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

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| W.M. W.                                  |  |   |
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## **OPERATOR CERTIFICATION**

I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief, and that this organization either owns a working interest or unleased mineral interest in the land including the proposed bottom hole location(s) or has a right to drill this well at this location pursuant to a contract with an owner of such a mineral or working interest, or to a voluntary pooling agreement or a compulsory pooling order heretofore entered by the division.

E-Signed By enesc Title: Regulatory Technicián Date: 1/28/2013

## SURVEYOR CERTIFICATION

I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.

Surveyed By: Fredd Kerr

Date of Survey: 2/20/1978

Certificate Number: 3950

#### SAN JUAN 28-7 254

Section 06-T27N-R07W API #: 3003921680

#### **MV Recompletion Procedure**

- 1. MIRU Completion rig. Check casing, tubing and Braden head pressures. RU Gas Recovery Unit and flare stack. Blow down well, killing with 2% KCI as necessary.
- 2. ND Well head and NU BOP.

3. TOOH with tubing.

- 4. Wireline set CBP at 6,700' in 4-1/2", 11#, K-55 Production Casing. (Squeezed hole in csg at 1,685' & circulated 55 sks to surface) 7" intermediate @ 3,591'.
- 5. Load hole with 2% KCL. RDMO Completion Rig.

6. RU wireline company. Run CCL, GR, & CBL log.

7. Perforate MV and run possible frac string.

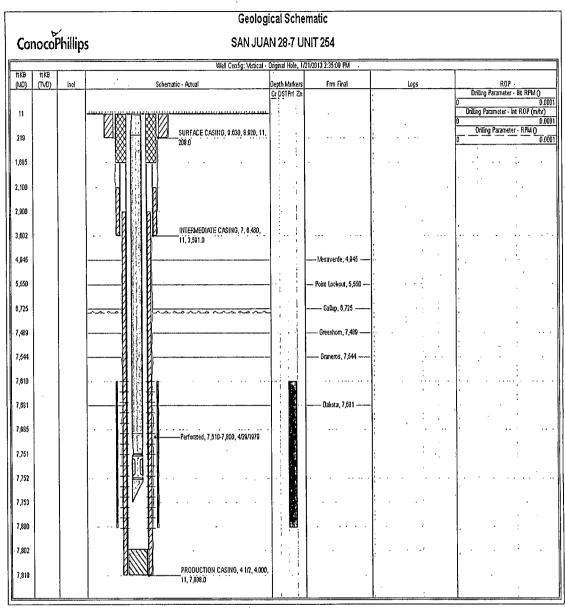
- 8. Rig up Frac Equipment.
- 9. Frac MV with 70Q foam.
- 10. Set CBP

11. Rig down Frac equipment and wireline.

12. MIRU Completion Rig

13. Drill out CBP. Clean out hole.

- 14. Run production string.
- 15. ND BOP, NU Wellhead. RDMO.



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