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P. 2160.5		REC.				
Corm 3160-5 UNITED STATES (August 2007) DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT AUG 29 20			20 2012	FORM APPROVED OMB No. 1004-0137		
	BUREAU OF LAND MAN	NAGEMENT		5. Lease Serial No.	uly 31, 2010	
Farmington Field C SUNDRY NOTICES AND REPORTS ON WELLS and Mana			n Field C	SF-079380		
	ot use this form for proposals t	to arill or to re-ente	eran	ement, mone of more	and the second sec	
abande	oned well. Use Form 3160-3 (A		i	7.1611-14.66.04/4		
SUBMIT IN TRIPLICATE - Other instructions on page 2. 1. Type of Well				7. If Unit of CA/Agreement, Name and/or No. San Juan 32-8 Unit		
Oil Well		2	8. Well Name and No. San Juan	32-8 Unit 213A		
. Name of Operator ConocoPhillips Company			9	9. API Well No. 30-045-32899		
3a. Address 3b. 1		3b. Phone No. (include ar		10. Field and Pool or Explorat	Field and Pool or Exploratory Area	
PO Box 4289, Farm 4. Location of Well (Footage, S	(505) 326-9	505) 326-9700 Basin Fruitland Coal 11. Country or Parish, State				
Surface UNIT E (SWNW), 2426' FNL & 1169 FWL, Sec. 22, T32N, R8W San Juan , New Mexico					New Mexico	
12. CHECK THE APPROPRIATE BOX(ES) TO INDICATE NATURE OF NO						
TYPE OF SUBMISSI		TYPE OF ACTION				
Notice of Intent	Acidize	Deepen Fracture Treat		oduction (Start/Resume) eclamation	Water Shut-Off Well Integrity	
X Subsequent Report	Casing Repair	New Construction		ecomplete	X Other Legacy	
Final Abandonment Notice Change Plans		Plug and Abandon Plug Back			Reclamation	
Attach the bond under whi following completion of th Testing has been complete determined that the site is ConocoPhillips Cor	npany completed the Legacy rec n. Please schedule a field inspec	e Bond No. on file with BLt ts in a multiple completion I only after all requirements I lamation of the loca	M/BIA. Requin or recompletio s, including rec tion on 8/5/	red subsequent reports must b n in a new interval, a Form 31 lamation, have been complete /13, as requested by N	e filed within 30 days 60-4 must be filed once d and the operator has Aike Flaniken during	
	OIL CONS. DI	V DIST. 3	ACCEPTED FO	ACCEPTED FOR RECORD		
		OCT 29	OCT 29 2013		OCT 2 5 2013	
			FARMINGTON FIELD OFFICE			
		···· •		BY		
14. Thereby certify that the for	egoing is true and correct. Name (Printed/T)	, ,				
Denise Journey Titl						
Signature Dentist Journey Date				8/23/2013		
	THIS SPACE FO	R FEDERAL OR S	TATE OFF	ICE USE		
Approved by						
Conditions of opproval if the	of warrant or cartify	Title		Date		
	are attached. Approval of this notice does nor r equitable title to those rights in the subject coverations thereon		Office			
Title 18 U.S.C. Section 1001 a false, fictitious or fraudulent st	nd Title 43 U.S.C. Section 1212, make it a ca atements or representations as to any matter		gly and willful	ly to make to any department o	or agency of the United States any	
(Instruction on page 2)						



