Submitted in lieu of Form 3160-5 (June 1990) **UNITED STATES** DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT** FORM APPROVED SUNDRY NOTICES AND REPORTS ON WELLS Budget Bureau No. 1004-0135 JAN 29 2014 Do not use this form for proposals to drill or to deepen or reentry to a Expires: March 31, 1993 different reservoir. Planing Hollis Chil. Use "APPLICATION FOR PERMIT" - for such proposals. 1. Type of Well: 5. Lease Number: Gas 016608 6. If Indian, allottee or Tribe Name: 2. Name of Operator: ConocoPhillips 7. Unit Agreement Name: 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 8. Well Name and Number: **SAN JUAN 28-7 UNIT 94** (505) 326-9700 RCVD FEB 4 114 4. Location of Well, Footage, Sec. T, R, U: 9. API Well No. DIL CONS. DTU. 3003907282 FOOTAGE: 800' FSL & 1850' FWL DIST. 3 S: 30 T: 028N R: 007W U: N 10. Field and Pool: **MV - BLANCO::MESAVERDE** PC - BLANCO SOUTH::PICTURED CLIFFS 11. County and State: RIO ARRIBA, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent Recompletion Change of Plans Subsequent Report Plugging Back New Construction Non-Routine Fracturing Final Abandonment Casing Repair Abandonment Altering Casing Water Shut Off Other- Re-Delivery Conversion to Injection 13. Describe Proposed or Completed Operations This well was re-delivered on 12/18/2013 and produced natural gas and entrained hydrocarbons. RE-DELIVERED SHUT IN FOR MORE THAN 90 DAYS DUE TO WAITING ON INJECTION TANK Notes: TP: 225 CP: 225 Initial MCF: 116 Meter No.: 72272 Gas Co.: **ENT** Proj Type.: REDELIVERY 14. I Hereby certify that the foregoing is true and correct. Title: Staff Regulatory TeACCEPTPate F (1) 24/2014 ORD Signed OUX Denise Journey JAN 3 1 2014 (This Space for Federal or State Office Use)

Title:

Date:

APPROVED BY:

CONDITION OF APPROVAL, if any: