Form 3160-5 (August 2007)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB No. 1004-0137

		BUKEAU OF LAN	DIMANA	ODMENT MA	R タロ カ	II A ISSUIT	es. July 51, 2010	
				,		5. Lease Serial No.	SF-078412	
SUNDRY NOTICES AND REPORTS ON WELLESCION FIELD						SF-076412		
	Do not us	e this form for prop	osals to a	drill or to re-en	leran Mai	nligeració	c rame	
	abandoned	well. Use Form 31	60-3 (APE	) for such proj	osals.			
SUBMIT IN TRIPLICATE - Other instructions on page 2.						7. If Unit of CA/Agreement, Name and/or No.		
1. Type of Well						SAN JUAN 29-5 UNIT		
Oil Well X Gas Well Other						8. Well Name and No.		
						SAN JUAN 29-5 UNIT 88M		
2. Name of Operator  ConocoPhillips Company						9. API Well No.	)-039-30702	
3a. Address	Conocor minps		Phone No. (include a	rea code)	10. Field and Pool or Exploratory Area			
PO Box 4289, Farmington, NM 87499				(505) 326-9700		BLANCO MV / BASIN DK/ BASIN MC		
4. Location of Well (Footage, Sec., T.,R.,M., or Survey Description)					11. Country or Parish, State			
Surface	-	V/SE) 438 'FNL & 14				Rio Arriba	, New Mexico	
Bottomhole		V/SE), 870 'FSL & 1			<del></del>	I		
	12. CHECK	THE APPROPRIATE E	BOX(ES) TO	INDICATE NATI	JRE OF NO	TICE, REPORT OR OT	HER DATA	
TYPE OF SUBMISSION					TYPE OF ACTION			
X Notice of Inte	Acidize		Deepen		Production (Start/Resume)	Water Shut-Off		
		Alter Casing		Fracture Treat	i i	Reclamation	Well Integrity	
Subsequent Report		Casing Repair		New Construction		Recomplete	X Other APD Ext.	
		Change Plans		Plug and Abandon	<u> </u>	l'emporarily Abandon		
Final Abando	nment Notice	Convert to Injection	·	Plug Back		Water Disposal		
13. Describe Proposed	d or Completed Op	peration: Clearly state all per	tinent details,	including estimated st	arting date of a	my proposed work and approx	imate duration thereof.	
	-	o extend the APD a Ilips is anticipated		-		n the expiration date 15.	of 8/11/13 for the	
							RCVD MAR 25'14	
						•		
						OIL CONS. DIV.		
							piot. 3	
•								
Thisaj	poval	expires: 8	3-11-	2015,				
14. I hereby certify that the foregoing is true and correct. Name (Printed/Typ. Arleen White			inted/Typed)	Title	Staff Regulatory Tech			
Signature	uleer 1	white		Date	3/20/	14		
		THIS SPA	CE FOR	FEDERAL OR S	TATE OF	FICE USE		
Approved by					1			
Cen	rthice	Marguen		,	Title (	LIE	3-21-14 Date	
- , ,		ned. Approval of this notice			06			
that the applicant hold entitle the applicant to		e title to those rights in the s	subject lease w	mich would	Office F	-FO		
			e it a crime for	r any person knowing	y and willfully	to make to any department or	agency of the United States any	
11110 10 0.5.C. Sectio		5 G.G.C. Decitor 1212, man		and bereen knowing	,	and the same of		