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Form 3160-5 (August 2007)	UNITED STAT DEPARTMENT OF THE BUREAU OF LAND MAN	INTERIOR		FORM AF OMB No Expires M	1004-0137 4 2015			
SU	DRY NOTICES AND REPO	ORTS ON WELLS		<ol> <li>Lease Serial No.</li> <li>SF-</li> <li>6. If Indian, Allottee or Tribe National Sector Sector</li></ol>	OFIONE			
Do not us	e this form for proposals t		SF-078995777, '9/21 6. If Indian, Allottee or Tribe Name					
	UBMIT IN TRIPLICATE - Other ins	tructions on page 2.						
I. Type of Well Oil Well	X Gas Well Other			SAN JUAN 31-6 UNIT 8. Well Name and No. SAN JUAN 31-6 UNIT 229 POW				
2. Name of Operator	Alter Casing Active to the period of the set on subject well as per the NMOCD regulations requiring the set on subject well as per the NMOCD regulations requiring the set on subject well as per the NMOCD regulations requiring the set on subject well as per the NMOCD regulations requiring the set on subject well as per the NMOCD regulations requiring the set on subject well as per the NMOCD regulations requiring that the site is ready for final inspection.)				9-24944			
		, i	,	BASIN FRU	Area JITLAND COAL			
		WL, SEC. 28, T31N,	R6W		New Mexico			
12. CHECK	THE APPROPRIATE BOX(ES)		JTICE, REPORT OR OTHER DATA					
TYPE OF SUBMISSION			E OF AC	TION				
X Notice of Intent	Alter Casing	Fracture Treat		eclamation	Water Shut-Off Well Integrity X Other			
Final Abandonment Notice					CONDUCT MIT			
<b>ConocoPhillips inten</b>	ds to permform a MIT test o		r the NN	IOCD regulations requiri	ng a MIT every 5			
• · · · ·	OIL CONS. DI	V DIST. 3	ACTIO OPERA AUTHO	N DOES NOT RELIEVE TH	IE LESSEE AND NY OTHER OR OPERATIONS			
4. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) Patsy Clugston Title			Staff Regulatory Technician					
Signature Parts	y Clust	Date		4/23/2015				
l	THIS SPACE FC	OR FEDERAL OR ST	ATE OFI					
Approved by Troy Salyers Conditions of approval, if any, are attached. Approval of this notice does not warrant or cert			Title P	E	Date 4/29/2015			
Conditions of approval, if any, are attact that the applicant holds legal or equital entitle the applicant to conduct operation	ble title to those rights in the subject lea		Office F	Fo				
Title 18 U.S.C. Section 1001 and Title false, fictitious or fraudulent statement			nd willfully	to make to any department or age	ncy of the United States any			

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## ConocoPhillips SAN JUAN 31-6 UNIT 229 Expense - MIT

Lat 36° 52' 5.556" N

## Long 107° 28' 22.548" W

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## PROCEDURE

1. Hold pre-job safety meeting. Comply with all NMOCD, BLM, and COPC safety and environmental regulations. Notify regualtory, BLM, and NMOCD at least 24 hours prior to planned MIT.

2. MIRU pump truck. Check casing, intermediate, and bradenhead pressures and record them in Wellview. If there is pressure on the BH, contact Wells Engineer.

3. Remove existing piping on casing valve. RU blow lines from casing valves and blow down any casing pressure. Ensure well is dead. Record any pressures seen in Wellview and contact Wells Engineer.

4. Top off tubing/casing annulus with 2 % KCI water & corrosion inhibitor, as necessary. Perform MIT (Mechanical Integrity Test) above the packer at 2959' to 560 psig for 30 minutes on a 2 hour chart with 1000# spring. If the test passes, SI the well. RD pump truck and MOL. If the test fails, contact the Rig Superintendent and Wells Engineer.

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