

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.

RECEIVED

APR 20 2017

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

Farmington Field Office
Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

ConocoPhillips

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 990' FNL & 1850' FEL

S: 32 T: 026N R: 004W U: B

5. Lease Number:

JIC CONT 120

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

8. Well Name and Number:

JICARILLA 17

9. API Well No.

3003922427

10. Field and Pool:

DK - LINDRITH GALLUP::DAKOTA

11. County and State:

RIO ARRIBA, NM

OIL CONS. DIV DIST. 3
APR 27 2017

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
	<input checked="" type="checkbox"/> Other- Re-Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 3/28/2017 and produced natural gas and entrained hydrocarbons.

Notes: WELL WAS SHUT IN FOR MORE THAN 90 DAY SFOR EQUIPMENT REPAIRS. RETURNED TO PRODUCITON 3/28/2017.

TP: 608

CP: 609

Initial MCF: 281

Meter No.: 85331

Gas Co.: WFC

Proj Type.: REDELIVERY

ACCEPTED FOR RECORD

APR 21 2017

FARMINGTON FIELD OFFICE
BY: William Tambekou

14. I Hereby certify that the foregoing is true and correct.

Signed

Christine Brock

Title: Staff Regulatory Tech.

Date: 4/20/2017

(This Space for Federal or State Office Use)

APPROVED BY: _____

Title: _____

Date: _____

CONDITION OF APPROVAL, if any: _____

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements.

NMOCDV