

submitted in lieu of Form 3160-5
**UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT**

DEC 09 2008
Bureau of Land Management
Farmington Field Office

Sundry Notices and Reports on Wells

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| <p>1. Type of Well
GAS</p> <p>2. Name of Operator
CONOCOPHILLIPS COMPANY</p> <p>3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M

Unit P (SESE), 870' FSL & 925' FEL, Section 22, T32N, R07W, NMPM</p> | <p>5. Lease Number
NMSF-078459</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name
San Juan 32-7 Unit</p> <p>8. Well Name & Number
San Juan 32-7 Unit 203A</p> <p>9. API Well No.

30-045-31813</p> <p>10. Field and Pool
Basin Fruitland Coal</p> <p>11. County and State
San Juan Co., NM</p> |
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12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

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|--|--|--|--|
| <p>Type of Submission</p> <p><input type="checkbox"/> Notice of Intent</p> <p><input checked="" type="checkbox"/> Subsequent Report</p> <p><input type="checkbox"/> Final Abandonment</p> | <p>Type of Action</p> <p><input type="checkbox"/> Abandonment</p> <p><input type="checkbox"/> Recompletion</p> <p><input type="checkbox"/> Plugging</p> <p><input type="checkbox"/> Casing Repair</p> <p><input type="checkbox"/> Altering Casing</p> | <p><input type="checkbox"/> Change of Plans</p> <p><input type="checkbox"/> New Construction</p> <p><input type="checkbox"/> Non-Routine Fracturing</p> <p><input type="checkbox"/> Water Shut off</p> <p><input type="checkbox"/> Conversion to Injection</p> | <p><input checked="" type="checkbox"/> <u>Other - Install Pump</u></p> |
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13. Describe Proposed or Completed Operations

11/3/08 MIRU Key 29. ND WH, NU BOP. 11/4/08 PT BOP-good. TOOH w/2 3/8" tbg. CO fill. 11/7/08 RIH w/112jts 2 3/8" 4.7# J-55 tbg & land @ 3524'. ND BOP, NU WH. RD RR @ 12:00hr on 11/7/08.

11/24/08 MIRU Sanjel. Spool in hole w/1.5" & .75" CT, cut off. 11/25/08 Circ & filter aqua link through CT. MU HDI pump on CT string, RIH w/pump & seat in F nipple @ 3513'. RU pump & load tbg, PT pump & tbg to 1000#-ok. Function test pump-good. RD RR @ 13:30hr on 11/25/08.

RCVD DEC 16 '08
OIL CONS. DIV.
DIST. 3

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

Signed Tamra Sessions Title Staff Regulatory Technician Date 12/09/2008.

(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 any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

ACCEPTED FOR RECORD

DEC 15 2008

FARMINGTON FIELD OFFICE
BY [Signature]

NMOCD
#0 12/17