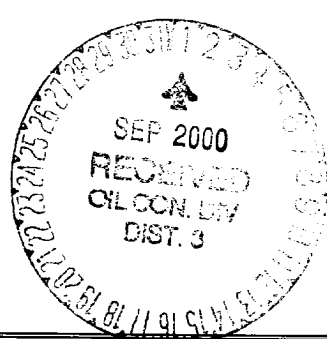


UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

COPY

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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		5. LEASE DESIGNATION AND SERIAL NO. CONT 105
SUBMIT IN TRIPLICATE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME JICARILLA APACHE
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. IF UNIT OR CO. AGREEMENT DESIGNATION JICARILLA A
2. NAME OF OPERATOR CONOCO INC.		8. WELL NAME AND NO. #14
3. ADDRESS AND TELEPHONE NO. P.O. Box 2197, DU 3066, Houston, TX 77252-2197 (281) 293-1613		9. API WELL NO. 30-039-20629
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1186' FNL & 1160' FEL, Section 24, T26N, R04W, Unit Letter "A"		10. FIELD AND POOL, OR EXPLORATORY AREA BLANCO MESA VERDE/WILD HORSE GALLUP
11. COUNTY OR PARISH, STATE RIO ARRIBA COUNTY		
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION		TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice		<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other: <u>ACID JOB</u> <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)</small>
13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.) 1/13/99 Casing pressure 220#, tubing pressure 100#. RU acid dump unit, estimated rate. Well went on vacuum after first 10 bbls. Pump in 100 gals of 15% HCl, 40 of flush. RD acid unit. RU swab unit. RU swab. RIH with swab. Swab back 68 bbls of fluid. Well kick off back on. Rig down move off.		
		
14. I hereby certify that the foregoing is true and correct		
SIGNED <u>Debra Sittner</u> (This space for Federal or State office use)		TITLE <u>DEBRA SITTNER, As Agent for Conoco Inc.</u> DATE <u>8/17/00</u>
APPROVED BY <u>/s/ Patricia M. Heator</u> Conditions of approval, if any:		TITLE <u>Land and Mineral Rights</u> DATE <u>AUG 31 2000</u>
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 or representations as to any matter within its jurisdiction.		