Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR

FORM APPROVED OMB NO. 1004-0135 cuires: November 30, 2000

BUREAU OF LAND MANAGEMENT				5. Lease Serial No.	10vember 30, 2000
SUNDRY NOTICES AND REPORTS ON WELLS Do not use this form for proposals to drill or to recenter an abandoned well. Use form 3160-3 (APD) for such proposals JUL 2001				SF-079321	
				6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRII	PLICATE - Other instruc	ctions on reverse sine CO	devision ?	. If Unit or CA/Agr	reement, Name and or No.
1. Type of Well	8. Well Name and No. SAN JUAN 28-07 UNIT 34				
☐ Oil Well ☑ Gas Well ☐ Other 2. Name of Operator Contact:		DEBRA SITTNER 9. API Well No.			
CONOCO INC.		E-Mail: dsittner@trigonesheehan.com		30-039-07192	
3a. Address P.O. BOX 2197 DU 3066 HOUSTON, TX 77252		3b. Phone No. (include area code) Ph: 970.385.9100 Ext: 125 Fx: 970.385.9107		10. Field and Pool of Exploratory BASIN FC/BLANCO MV/PCS	
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)		11. County or Parish, and State	
Sec 1 T27N R07W Mer SENE			RIO ARRIBA COUNTY, NM		
12. CHECK APPE	ROPRIATE BOX(ES) TO	O INDICATE NATURE OF	NOTICE, RI	EPORT, OR OTHI	ER DATA
TYPE OF SUBMISSION	TYPE OF ACTION				
	☐ Acidize	☐ Deepen	☐ Product	ion (Start/Resume)	☐ Water Shut-Off
☐ Notice of Intent	☐ Alter Casing	☐ Fracture Treat	□ Reclam	ation	■ Well Integrity
Subsequent Report ■	☐ Casing Repair	☐ New Construction	□ Recomp	olete	☐ Other
☐ Final Abandonment Notice	☐ Change Plans	Plug and Abandon	□ Tempor	□ Temporarily Abandon	
	☐ Convert to Injection	Plug Back	□ Water I	Disposal	
If the proposal is to deepen direction: Attach the Bond under which the wo following completion of the involvectesting has been completed. Final Aldetermined that the site is ready for f PLEASE SEE ATTACHED PL	ck will be performed or provide to operations. If the operation repandonment Notices shall be friend in the provided the friend of the provided the friend of the provided the friends of the provided the friends of the provided	e the Bond No. on the with BLM/H esults in a multiple completion or re led only after all requirements, and	ecompletion in a uding reclamatio	nsequent reports shall to new interval, a Form 3 n, have been completed	160-4 shall be filed once d, and the operator has
14. I hereby certify that the foregoing is	Electronic Submission	#5287 verified by the BLM Wo	ell Information	System	
	Committed to AFMSS	for processing by Maurice Joi	hnson on 07/00	5/2001 ()	
Name (Printed/Typed) DEBRA S	Title AUTH	IORIZED REPR	RESENTATIVE		
Signature	Date 06/26.	Date 06/26/2001			
	THIS SPACE F	OR FEDERAL OR STAT	E OFFICE U	ISE	
		Title	- 		<u>}</u>
Conditions of approval, if any, are attache certify that the applicant holds legal or ec which would entitle the applicant to cond	uitable title to those rights in the uct operations thereon.	ne subject lease Office			
Title 18 U.S.C. Section 1001 and Title 43 States any false, fictitious or fraudulent	U.S.C. Section 1212, make it statements or representations	a crime for any person knowingly as to any matter within its jurisdiction	and willfully to n	nake to any department	or agency of the United

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