## UNITED STATES DEPARTMENT OF THE INTERIOR

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

BUREAU OF LAND MANAGEMENT		Expires. Marcr 51, 1995
		5. LEASE DESIGNATION AND SERIAL NO.
		SF 079508
SUNDRY NOTICES AND REPORTS ON WELLS		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
Do not use this form for proposals to drill or to de	epen or reentry to a different reservoir.	1 5
Use "APPLICATION FOR PERMI	T-" for such proposals	
SUBMIT IN TRIPLICATE		7. IF UNIT OR CA, AGREEMENT DESIGNATION
1. TYPE OF WELL	16/11/6/19/20	COLE
		8. WELL NAME AND NO.
OIL WELL GAS WELL OTHER  2. NAME OF OPERATOR	OCT 2000	#1
CONOCO INC.	E 985	9. API WELL NO.
ADDRESS AND TELEPHONE NO.		30-045-06998
P.O. Box 2197, DU 3066, Houston, TX 7725	2 2407 (224) 202 (204)	10. FIELD AND POOL, OR EXPLORATORY AREA
LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Desc.)	2-2197 (281) 293-1613	BASIN FRUITLAND COAL
1650' FSL & 990' FWL, Section 35, T		11. COUNTY OR PARISH, STATE
		SAN JUAN COUNTY
	O INDICATE NATURE OF NOTICE,	REPORT, OR OTHER DATA
TYPE OF SUBMISSION	TYPE	OF ACTION
Notice of Intent	Abandonment	Change of Plans
<b>⊠</b> 6k	Recompletion	New Construction
Subsequent Report	Plugging Back	
Final Abandonment Notice		Non-Routine Fracturing
	Casing Repair	☐ Water Shut-Off
	Altering Casing	Conversion to Injection
	Other: Lower Tubing	Dispose Water
13. Describe Proposed or Completed Operations (Clearly state all pe	di	(Note: Report results of multiple completion on Well Completion of Recompletion Report and Log Form.)
<ol> <li>Describe Proposed or Completed Operations (Clearly state all pe directionally drilled, give subsurface locations and measured and</li> </ol>	true vertical depths for all markers and zones pertinen	nated date of starting any proposed work. If well is to this work.)
		,
10/5/00 Cog Proceure 05# Tubing proces	440# 12#-1 N. NIDMIT AUG	
10/5/00 Csg Pressure 95#, Tubing pressure 110#. Killed well. NDWH- NUBOP. TOOH 53 joints of 2-1/16"		
tubing. Seat nipple at 1748'. Tallied and RIH w/ 60 joints of 2-1/16" tubing production string, seat		
nipple and mule shoe to 1969'. NDBOP-NUWH, RDMO.		
14. I hereby certify that the foregoing is true and correct		
N & the		
SIGNED LEBRA XCCher	TITLE DEBRA SITTNER, As Ager	nt for Cono∞ Inc. DATE 10/10/00
(This space for Federal or State office use)		
APPROVED BY	TITLE	DATE
Conditions of approval, if any:		
Fitle 18 U.S.C. Section 1001, makes it a crime for any person ictitious or fraudulent statements or representations as to any	knowingly and willfully to make to any departm	ent or agency of the Unites States any false,
	* See Instruction on Reverse Side	EXPERISE REFERE

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