

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

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

**SUNDRY NOTICES AND REPORTS ON WELLS**

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.

**SUBMIT IN TRIPLICATE - Other Instructions on reverse side**

1. Type of Well

☐ Oil Well ☒ Gas Well ☐ Other

2. Name of Operator

Phillips Petroleum Company

3a. Address

5525 Highway 64, NBU 3004, Farmington, NM 87401

3b. Phone No. (include area code)

505-599-3454

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)

Unit B, 1090' FNL & 1138' FEL  
Seciton 25, T29N, R6W

5. Lease Serial No.

NM-012671

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

San Juan 29-6 Unit

8. Well Name and No.

SJ 29-6 Unit #82

9. API Well No.

30-039-20357

10. Field and Pool, or Exploratory Area

Basin Dakota

11. County or Parish, State

Rio Arriba, NM

12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

- ☒ Notice of Intent  
☐ Subsequent Report  
☐ Final Abandonment Notice

TYPE OF ACTION

- |   |   |  |  |
|---|---|--|--|
| <input type="checkbox"/> Acidize              | <input type="checkbox"/> Deepen           | <input type="checkbox"/> Production (Start/Resume) | <input type="checkbox"/> Water Shut-Off          |
| <input type="checkbox"/> Alter Casing         | <input type="checkbox"/> Fracture Treat   | <input type="checkbox"/> Reclamation               | <input type="checkbox"/> Well Integrity          |
| <input type="checkbox"/> Casing Repair        | <input type="checkbox"/> New Construction | <input type="checkbox"/> Recomplete                | <input type="checkbox"/> Other <u>Add MV pay</u> |
| <input type="checkbox"/> Change Plans         | <input type="checkbox"/> Plug and Abandon | <input type="checkbox"/> Temporarily Abandon       | <u>to Dakota well</u>                            |
| <input type="checkbox"/> Convert to Injection | <input type="checkbox"/> Plug Back        | <input type="checkbox"/> Water Disposal            |  |

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleat in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the final site is ready for final inspection.)

This is a Dakota well that was completed in 4/71. See attached for the proposed procedure to come up hole and complete the Mesaverde. Also attached is the C102 for the Mesaverde interval.

We will then commingle the Mesaverde and Dakota production downhole. This well will be commingled per Order R11187 after the paperwork has been filed and the individual well commingling order received. We will submit a sundry reporting the date actual commingling occurs.

14. I hereby certify that the foregoing is true and correct  
Name (Printed/Typed)

Patsy Clugston

Title

Sr. Regulatory/Proration Clerk

Date

5/31/00

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by

Title

Date

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office

## **Projected Recompletion Outline for the San Juan 29-6 Unit #82**

1. RU completion rig. Pull production tubing.
2. Set RBP above Dakota interval and pressure test casing.
3. Perforate the Mesaverde intervals 1 spf .36" holes at depth to be determined from GR/CCL/CBL.
4. Breakdown Mesaverde perforations using 15% HCL.
5. Stimulate the entire Mesaverde with 150,000 gal slickwater and 75,000 # sand.
6. Isolate the Mesaverde perforations.
7. Perforate the Lewis Shale interval @ 1 spf .36" holes at depths to be determined from GR/CCL/CBL.
8. Breakdown Lewis Shale perforations with 15% HCL & ballsealers.
9. Stimulate the Lewis Shale with 200,000 # sand and 60 Quality N2 foam.
10. Flow back well on ¼" & ½" chokes to cleanup.
11. Drill out plugs and clean out well and land tubing. Return well to production.

**District I**

1625 N. French Dr., Hobbs, NM 88240

**District II**

811 South First, Artesia, NM 88210

**District III**

1000 Rio Brazos Rd., Aztec, NM 87410

**District IV**

2040 South Pacheco, Santa Fe, NM 87505

State of New Mexico  
Energy, Minerals & Natural ResourcesOIL CONSERVATION DIVISION  
2040 South Pacheco  
Santa Fe, NM 87505Form C-10  
Revised March 17, 199Submit to Appropriate District Office  
State Lease - 4 Copie  
Fee Lease - 3 Copie☐ AMENDED REPOR

## WELL LOCATION AND ACREAGE DEDICATION PLAT

<sup>1</sup> API Number 30-039-20357	<sup>2</sup> Pool Code 72319	<sup>3</sup> Pool Name Blanco Mesaverde
<sup>4</sup> Property Code 002957	<sup>5</sup> Property Name San Juan 29-6 Unit	<sup>6</sup> Well Number 82
<sup>7</sup> OGRID No. 017654	<sup>8</sup> Operator Name Phillips Petroleum Company	<sup>9</sup> Elevation 6645'

<sup>10</sup> Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B	25	29N	6W		1090	North	1138	East	Rio Arriba

<sup>11</sup> Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
B									

<sup>12</sup> Dedicated Acres 233.88 E/2	<sup>13</sup> Joint or Infill J	<sup>14</sup> Consolidation Code U	<sup>15</sup> Order No.
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NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED OR A  
NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16					<sup>17</sup> OPERATOR CERTIFICATION	
					I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief	
					Signature Patsy Clugston Printed Name Sr. Regulatory/Proration Clerk Title May 31, 2000 Date	
<sup>18</sup> SURVEYOR CERTIFICATION I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief. see original C102 dated Date of Survey January 11, 1971 Signature and Seal of Professional Surveyor: signed by David O. Vilven 1760 Certificate Number						