

Conoco 29-4 #10

UNITED STATES
DEPARTMENT OF INTERIOR
BUREAU OF LAND MANAGEMENT

SUDRY NOTICES AND REPORTS ON WELLS
(Do Not use this form for proposedals to drill or to deepen or plug back to a different resevoir. Use Form 3160-3 for such proposals)

5. Lease Description and Serial No.
NM - 18317

6. If Indian, Allottee or tribe Name

7. If Unit or CA, Agreement Number

8. Well Name and No.
29-4 CONOCO 14 #

9. API Number
300392158600s1

10. Field and Pool, or Exploratory Acres
Gobernador P. C.

11. County or Parish
Rio Arriba Co., NM

1. Type of Well
GAS WELL

2. Name of Operator
FALCON SEABOARD OIL COMPANY

3. Address and Telephone Number
C/O DAVE SIMMONS P. O. BOX 48 FARMINGTON, NM 87499

4. Location of Well (Sec., T., R., or Survey Description)
**980' FNL & 790' FEL
Sec. 14, T29N, R4W**

RECEIVED
BLM MAIL ROOM
95 SEP 14 AM 11:26
FARMINGTON, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Report	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other:	<input type="checkbox"/> Disposal Water

(Note Report result of multiple completions on Well Completion or Recompletion Report and Log Form)

13. Describe Proposed Completion Operations (Clearly state all pertinent details, and give pertinent dates, including estimated starting and proposed work. If well is directionally drilled, give subsurface location and measured and true vertical depths for all markers and zones pertinent to this work.)*

* OPERATOR PLANS TO REPERFORATE THE EXISTING PRODUCING ZONES IN THE PICTURE CLIFFS FORMATION. THE PERFORATIONS WILL BE ACIDIZED AND FRACTURE STIMULATED IF REQUIRED USING A 70Q FOAM FRAC.

RECEIVED
SEP 19 1995
OIL COAL LAND DISTRICT

NOTE: This format is issued in lieu of U.S. BLM Form 3160-5

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

SIGNED R. D. SIMMONS TITLE _____ AGENT _____ DATE: 09/14/95

(This space for Federal or Stae Office use.)

APPROVED BY: _____ TITLE _____ DATE: _____

CONDITIONS OF APPROVAL, IF ANY

APPROVED
SEP 14 1995
DISTRICT MANAGER

MOOD