

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE
(Other instructions on reverse side)

Form approved.
Budget Bureau No. 1004-0135
Expires August 31, 1985

SUNDRY NOTICES AND REPORTS ON WELLS

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <u>Tight Hole</u>		5. LEASE DESIGNATION AND SERIAL NO. SF-078278	
2. NAME OF OPERATOR Phillips Petroleum Company		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 4001 Penbrook Street, Odessa, Texas 79762		7. UNIT AGREEMENT NAME San Juan 29-6 Unit	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface Unit N, 803' FSL & 1528' FWL		8. FARM OR LEASE NAME	
14. PERMIT NO.		9. WELL NO. 215	
15. ELEVATIONS (Show whether SP, RT, GR, etc.) 6487'		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal Gas	
		11. SEC., T., R., N., OR BLK. AND SUBST OR AREA 3, 29N, 6W	
		12. COUNTY OR PARISH Rio Arriba	
		13. STATE NM	

16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <u>Commence drlg-set csg.</u> <input checked="" type="checkbox"/>	
(Other) <input type="checkbox"/>		(NOTE: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)	

17. 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.)*

4-09-90: MI & RU Aztec Well Service's, rig no. 301. Spudded 12-1/4" hole @ 2:30 p.m. Set 9-5/8" 36# J-55 ST&C csg @ 287.15' w/250 sx Class "B" cmt w/3% CaCl2 & 1/4# celloflake/sx. Circ. 140 sx. Pumped plug w/500 psi. WOC total of 9 hrs before testing pipe & blind rams to 600 psi. Drld out cmt tst'd csg to 600 psi.

4-12-90: Td'd 8-3/4" hole @ 1:30 p.m. Set 7" 23# J-55 LT&C csg @ 3189' w/500 sx 65/35 Poz cmt w/12% gel & 1/4# /sx celloflake followed w/150 sx Class "B" cmt w/1/4# celloflake per sx. Circ. 140 sx cmt. Bumped plug w/1500 psi. ND BOP's and set csg slips w/16,000#. Released rig @ 5:00 a.m. 4-13-90. Waiting on completion unit.

~~***THIS IS A TIGHT HOLE***~~

RECEIVED
JUN 11 1990
OIL CON. DIV.
DIST. 3

ACCEPTED FOR RECORD

MAY 01 1990

FARMINGTON RESOURCE AREA

BY W

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

SIGNED

J. L. Maples

TITLE Reg. & Pro. Assistant

DATE 4/20/90

(This space for Federal or State office use)

APPROVED BY

CONDITIONS OF APPROVAL, IF ANY:

TITLE

DATE

NMOOD

*See Instructions on Reverse Side