Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to re-enter an

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

			,
5.	Lease	Serial	No

1411	-U34/I		
6.	If Indian.	Allottee or	r Tribe Name

	1160-3 (APD) for such pro	iposals.			
SUBMIT IN TRIPLICATE - Oti	her instructions on re	verse side	, , , , , , , , , , , , , , , , , , , ,	7. If Unit or CA/Agreement, Name and/or No	
1. Type of Well			San Juan 29-6 Unit 8. Well Name and No.		
Oil Well X Gas Well Other 2. Name of Operator				1	
Phillips Petroleum Company				SJ 29-6 Unit #105R 9. API Well No.	
3a. Address FE2F Highway 64 NRU 3004 Farmington		Phone No. (<i>include ar</i> 5-599-34 54	ea code)	30-039-26467	
5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454 4. Location of Well (Footage, Sec., T., R., M., or Survey Description)				10. Field and Pool, or Exploratory Area Blanco MV and	
Unit M, 660' FSL & 860' FWL Section 28, T29N, R6W				Basin DK	
				11. County or Parish, State	
12. CHECK APPROPRIATE	BOX(ES) TO INDICA	ATE NATURE OF NO	TICE, REPORT	Rio Arriba, NM OR OTHER DATA	
TYPE OF SUBMISSION			E OF ACTION	· · · · · · · · · · · · · · · · · · ·	
Notice of Intent	Acidize	Deepen	Production	n (Start/Resume) Water Shut-Off	
	Alter Casing	Fracture Treat	Reclamatio		
X Subsequent Report	Casing Repair	New Construction	Recomplet		
Final Abandonment Notice	Change Plans	Plug and Abandon	Temporari	ly Abandon Spud Report	
	Convert to Injection	Plug Back	Water Dis		
8/31/00 MIRU Key Energy #47. Spud 12-1/4" w/9-5/8", 32.3#, H-40 casing and se cello-flake (310 cf - 95.20 bbl slu bbls circulated to surface. WOC.	t @ 320'. RU to rry). Displaced	cement. Pumped	d 220 sx Ty		
casing to 200 psi, and then 1500 ps			- OK. RIH	@ 0200 hrs 9/1/00. Had 10	
casing to 200 psi, and then 1500 ps			OK. RIH	@ 0200 hrs 9/1/00. Had 10	
casing to 200 psi, and then 1500 ps		manifold. PT	OK. RIH	@ 0200 hrs 9/1/00. Had 10	
14. I hereby certify that the foregoing is true and correct		manifold. PT	OK. RIH	@ 0200 hrs 9/1/00. Had 10	
14. I hereby certify that the foregoing is true and correct Name (Printed Typed)		mani fold, PT		@ 0200 hrs 9/1/00. Had 10	
14. I hereby certify that the foregoing is true and correct Name (Printed Typed)	i. Good test.	mani fold, PT	r. Regulato	@ 0200 hrs 9/1/00. Had 10 w/bit to 285'. PT rams and	
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed) Pa Addy THIS SI	i. Good test.	Title Si Date 9/5/0	r. Regulato	ry/Proration Clerk	
14. I hereby certify that the foregoing is true and correct Name (Printed Typed) Pa	i. Good test.	Title SI Date 9/5/0 AL OR STATE OFF	r. Regulato	@ 0200 hrs 9/1/00. Had 10 w/bit to 285'. PT rams and	