

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUBMIT IN TRIPLICATE*
(Other instructions on re-
verse side)

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 checked="" type="checkbox"/> GAS WELL <input type="checkbox"/> OTHER <input type="checkbox"/>		5. LEASE DESIGNATION AND SERIAL NO SF-078046	
2. NAME OF OPERATOR CONOCO INC., %R. R. Heldenbrand		6. IF INDIAN, ALLOTTEE OR TRIBE NAME	
3. ADDRESS OF OPERATOR 3817 NW Expressway, Oklahoma City, OK 73112		7. AGREEMENT NAME	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements. See also space 17 below.) At surface 1370' FNL & 1500' FEL (SWNE)		8. TERM OR LEASE NAME HUGHES "B"	
14. PERMIT NO. 30-045-27886		9. WELL NO. 18	
15. ELEVATIONS (Show whether DF, RT, GR, etc.) 6474' GR		10. FIELD AND POOL, OR WILDCAT Basin Fruitland Coal Gas	
		11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 21-T29N-R8W	
		12. COUNTY OR PARISH San Juan	
		13. STATE NM	

RECEIVED
OCT 25 1990
OIL CON. DIV.
DIST. 3

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>New Well</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.)

Operatorship transferred from Amoco Production to Conoco Inc.

Spud 10:30 pm, 9-3-90; Released rig 9:00 am, 9-14-90.

Ran 6 joints 8 5/8", 24#; Set at 260'. Cement w/200 sx Cl.G plus 2% CACl & 0.25#/5 sx D-29 Flare. Full returns throughout job. 14 bbls cement returns to surface.

Ran 73 joints 5 1/2", - 17#; Set at 3156'. Stage collar @2330'-Float collar @3112'.

1st Stage Cement - Lead: 197 ft³ of Cl. G/Poz (35/65), 6% Gel, 10% Salt, 0.25% Friction Reducer, 6.25 lb/sk Gilsonite, 0.25 lb/sk cellophane flake.
Tail: 94 ft³ of Cl. G + 2% CACL₂ + 0.25 lb/sk cellophane flake. No cement to surface.

2nd Stage Cement: Lead: 1062 ft³ of Cl. G/Poz (35/65) +6% Gel + 10% Salt +0.25% Friction Reducer + 6.25 lb/sk Gilsonite + 0.25 lb/sk Cellophane Flake..
Tail: 80 ft³ of Cl. G + 2% CACL₂ + 0.25 lb/sk Cellophane Flake. Cement Returns To Surface.

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

SIGNED Ronald R. Heldenbrand TITLE Manager-Regulatory Affairs DATE Oct. 3, 1990
(This space for Federal or State office use)

APPROVED BY _____
CONDITIONS OF APPROVAL, IF ANY:

TITLE _____

ACCEPTED FOR RECORD
DATE _____

OCT 18 1990

*See Instructions on Reverse Side

FARMINGTON RESOURCE AREA

BY MT

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.