

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT - " for such proposals

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. SF-078997
2. Name of Operator Phillips Petroleum Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 5525 Highway 64, NBU 3004, Farmington, NM 87401 505-599-3454	7. If Unit or CA, Agreement Designation San Juan 30-5 Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit M, 810' FSL & 800' FWL Section 9, T30N, R5W	8. Well Name and No. SJ 30-5 Unit #49
	9. API Well No. 30-039-21830
	10. Field and Pool, or exploratory Area Basin Dakota and Blanco Mesaverde
	11. County or Parish, State Rio Arriba, NM

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

TYPE OF SUBMISSION	TYPE OF ACTION
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back
	<input type="checkbox"/> Casing Repair
	<input type="checkbox"/> Altering Casing
	<input checked="" type="checkbox"/> Other <u>Actual commingle notif.</u>
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

13. 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.)

Please note that on October 1, 1997 the sliding sleeve on the tubing was opened allowing production from both the Mesaverde and Dakota zones to be commingled.

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

Signed [Signature] Title Regulatory Assistant

(This space for Federal or State office use)

Approved by _____ Title _____
Conditions of approval, if any:

Date 10-6-97

ACCEPTED FOR RECORD

OCT 09 1997

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 statements or representations as to any matter within its jurisdiction.

* See Instruction on Reverse Side

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