

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

COPY

SUNDRY NOTICES AND REPORTS ON WELLS		5. LEASE DESIGNATION AND SERIAL NO.
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.		NMSF080469
SUBMIT IN TRIPLICATE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>		7. UNIT OR CA, AGREEMENT DESIGNATION Fogelson 11
2. NAME OF OPERATOR CONOCO INC.		8. WELL NAME AND NO. Fogelson 11 #1
3. ADDRESS AND TELEPHONE NO. 10 Desta Drive, Suite. 100W Midland, Texas 79705-4500 (915) 686-5424		9. API WELL NO. 30-045-08568
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1650' FNL & 1120' FWL, UNIT LETTER "E", SEC.11, T29N-R11W		10. FIELD AND POOL, OR EXPLORATORY AREA Basin Dakota
		11. COUNTY OR PARISH, STATE San Juan County, 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 checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other: REPLACE PACKER <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.)		
12-28-98 Check Pressures 500# csg. 520# tbq. Run pump lines, bleed off csg. Kill tbq. ND Wellhead, NU BOP, Pulled hanger, work tbq. And released pkr. TOOH w/70 stands.		
12-29-98 Check Pressure, 30# csg. 20 tbq. Bleed off well. Finish TOOH w/ model "D" pkr. PU bridge plug and set 60' in csg. Load csg. W/ fluid, RD floor, NDBOP. NU BOP, RU floor. Pull out bridge plug. TIH w/seating nipple and mule shoe and 33jts. 2 3/8" tbq.		
12-30-98 Bled off well 60#. PU Halliburton SSC valve and set 60' below surface. ND BOP and change out tbq. head. NU BOP and TIH, pull out SSC valve. PU Halliburton PLS55191 E HES pkr, TIH w/tbq., land tbq 33 jts below pkr @ approx. 6497' KB and 190 jts. above the pkr. PKR set @ approx. 5525' KB. ND BOP, NU wellhead. RU to swab. Swab well.		
12-31-98 RD		
14. I hereby certify that the foregoing is true and correct		
SIGNED <u>Verla Johnson</u> TITLE <u>VERLA JOHNSON, As Agent for Conoco Inc.</u> DATE <u>1-5-99</u>		
(This space for Federal or State office use)		
APPROVED BY _____ TITLE _____ DATE _____		
Conditions of approval, if any:		
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.		

* See Instruction on Reverse Side

ARMINGTON DISTRICT OFFICE

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