

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

COPY

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 OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	5. LEASE DESIGNATION AND SERIAL NO. NMSF080469 Nm-03486A
2. NAME OF OPERATOR CONOCO INC.	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
3. ADDRESS AND TELEPHONE NO. 10 Desta Drive, Suite. 100W Midland, Texas 79705-4500 (915) 686-5424	7. IF UNIT OR CA, AGREEMENT DESIGNATION Fogelson 11
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1650' FNL & 1120' FWL, UNIT LETTER "E", SEC.11, T29N-R11W	8. WELL NAME AND NO. Fogelson 11-1
9. API WELL NO. 30-045-08568	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 Check Tubing/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.) 8/3/99 MIRU. Spot all equipment. NDWH & NUBOP. RIH with 5 jts of 2 3/8" tubing to tag for fill. POOH with all 2 3/8" tubing and Hallib 5 1/2" PLS packer. Tally all tubing and did not have any fill. Tagged @ PBTD @ 6630'. Found tubing leak on the 136 jt. 8/4/99 Check pressures. Csg - 50 psi. RIH with Mule Shoe Collar, SN and 2 3/8" tbg. Run 31 jts of 2 3/8" tbg, Hallib 5 1/2" PLS packer, and 73 jts of 2 3/8" tubing. Testing all tubing to 1000 psi. Have changed out 18 tbg collars and 10 jts of tubing. 8/5/99 Continue to RIH with tubing and Hallib 4 1/2" PLS packer. Replaced a total of 11 jts of 2 3/8" tubing. Tubing detail as follows. Mule Shoe Collar, SN, 31 jts of 2 3/8" tubing, Hallib PLS packer, and 190 jts of 2 3/8" tubing. Packer @ 5537' and EOT @ 6448'. with KB added in. Set packer with 7000 # compression. Tested tubing to 1000 psi. Fished standing valve. RU to swab. Made 9 runs and recovered 48 bbls of water. 8/9/99 Check tbg pressures. Tbg - 350 psi. Flow well to tank. RU to swab, made 2 swab runs and recovered 4 bbls. Well started flowing, flowed 6 bbls to pit. RD swab. RDMO. FINAL REPORT	
14. I hereby certify that the foregoing is true and correct	
SIGNED <u>Verla Johnson</u> (This space for Federal or State office use)	TITLE <u>VERLA JOHNSON, As Agent for Conoco Inc.</u> DATE <u>8-16-99</u>
APPROVED BY _____ Conditions of approval, if any:	TITLE _____ DATE _____
ACCEPTED FOR RECORD	
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

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AUG 23 1999