

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

SUNDRY NOTICES AND REPORTS ON WELLS
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.

5. Lease Serial No.
SF-080751A

6. If Indian, Allottee or Tribe Name

7. If Unit or CA/Agreement, Name and/or No.

8. Well Name and No.
HOUCK COM 01A

9. API Well No.
30-045-30137

10. Field and Pool, or Exploratory
BLANCO MESA VERDE

11. County or Parish, and State
SAN JUAN COUNTY, NM

SUBMIT IN TRIPLICATE - Other instructions on reverse side.

1. Type of Well
 Oil Well Gas Well Other

2. Name of Operator
CONOCO INC. Contact: DEBRA SITTNER
E-Mail: dsittner@trigon-sheehan.com

3a. Address
P.O. BOX 2197 DU 3066
HOUSTON, TX 77252

3b. Phone No. (include area code)
Ph: 970.385.9100 Ext: 125
Fx: 970.385.9107

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Sec 1 T29N R10W Mer SWNE 1345FNL 1800FEL

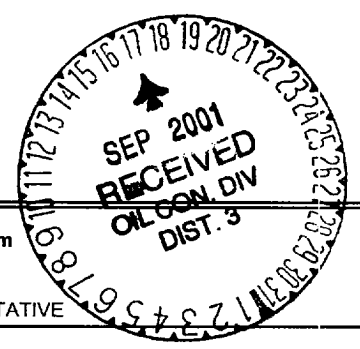
12. CHECK APPROPRIATE BOX(ES) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION	TYPE OF ACTION			
<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Acidize	<input type="checkbox"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> STARTUP
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recomplete horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

PLEASE REFER TO ATTACHED DAILY INFORMATION AS PROVIDED BY CONOCO ON THE BLANCO MESA VERDE COMPLETION.

REPORT CEMENT TOPS



14. I hereby certify that the foregoing is true and correct.
Electronic Submission #6456 verified by the BLM Well Information System For CONOCO INC., sent to the Farmington Committed to AFMSS for processing by Lucy Bee on 08/20/2001 ()

Name (Printed/Typed) DEBRA SITTNER Title AUTHORIZED REPRESENTATIVE

Signature _____ Date 08/15/2001

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By _____ Title _____ Date _____

Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.

Office _____

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ** ORIGINAL ****

2 14 2001

NMOCD

RECEIVED

L SCHEMATIC

Well Name: Houck Com 1A

Spud Date: ##

API #: 30-045-30137

7-1/16" 5M x 2-1/16" Tree Adaptor/Cap

11" 3M x 7-1/16" 5M Tubing Spool

11" 3M x 11" 3M Casing Spool

9-5/8" 8rd x 11" 3M Casing Head

Surface Casing

Size 9 5/8 in
 Depth 295 ft # of jts: 7
 Height 36 ppf Grade J-55
 Size 12 1/4 in
 Weight 100 % Csg Shoe @ 295 ft
 .C. 0 ft TD of Surface 310 ft

X	New
	Used

Cement

Lead : 140
 + 2
 Tail :
 Note : No

Intermediate Casing

Size 7 in
 Depth 20 ppf Grade J-55 from 0 ft
 Height ppf Grade from ft
 Size 8 3/4 in to ft
 Weight 30 %
 .C. 0 ft Csg Shoe @ 1949 ft
 (by TL) TD of Inter. 1949 ft

X	New
	Used

Displace. Vol. & Fluid:
 Bumped Plug @:
 Press. Plug bumped:
 Returns during job:
 Returns to surface:
 Floats Held:
 W.O.C. for

7 in
Cement
 Lead : 212 sx
 + 8% g
 Tail : 93 sxs
cello fl
 Note :

Displace. Vol. & Fluid:
 Bumped Shoe Plug @:
 Bumped DV Plug @:
 Press. Plug bumped:

Intermediate TD @ 1949 ft

Returns during job:
 Returns to surface:
 Floats Held:

W.O.C. for
 Mud Wt.:

Shoe Test : NA

Date cmt'd: ###

s (92 bbls) 35:65 Type 3 + 6% gel

ppg & 2.05 yield

81 bbls 2% KCL w/ biocide

###

###

Yes (air)

None

Yes

air

NA

Total: 4

Total: 13

Total: 0

ed to 210 psi by

	<table border="1" style="margin: auto;"> <tr><td style="text-align: center;">X</td></tr> <tr><td style="text-align: center;"> </td></tr> </table>	X		New Used		## in Cement Lead : 250 sx @ 12.5 _____ Note : _____ _____
X						
Production Casing	Date set	###				
ize	4 1/2	in				
ht	10.5	ppf	Grade J-55	from 0 ft		
				to 5166 ft		
ht		ppf	Grade	from _____ ft		
				to _____ ft		
D	5120	ft	(top of Float Collar)			
ize	6 1/4	in				
ut:	50	%				
.C.	2000	ft	(by lift press)			
op	3920	ft	Length:	10.12 ft		
	Mud Wt. =	air	ppg @ TD			
			FC 5120 ft			
			Csg Shoe @ 5166 ft			
				Displace. Vol. & Fluid:		
				Bumped Plug @:		
				Press. Plug bumped:		
				Returns during job:		
				Returns to surface:		
				Floats Held:		
				W.O.C. for		
				Mud Wt.:		
				Shoe Test :		
			TD @ ##	ft		

CENTRALIZER LOCATION:

Surface: 1 on Shoe Joint. Then 1 every 2nd joint to surface

Intermediate: One on shoe joint and one on joint #2 then one every fourth joint to surface

Production: None were run due to rotating rubber seal and gas production

COMMENTS

Surface: Circulate 12 bbls cement to surface

Intermediate: Circulate 40 bbls cement to surface

Production: At 75 bbls displacement had 500 psi lift pressure, broke back to 190 psi lift pressure and then climb end of displacement. Lift pressure indicates TOC at +/- 2,000'.

Rig Release Date: ## _____

Rig RKB (ft): _____

Date cmt'd: ### _____

35 (35 bbls) Type III + .25 pps cello flake

% CaCl @ 14.5 ppg 1.41 yield

top out job required

19.5 bbls. FW

###

###

Yes

Yes 12 bbls

Yes

###

N/A

24

Date cmt'd: ### _____

91 (91 bbls) Lite + 2% CaCl + .25 pps CF

el @ 12.1 ppg & 2.21 yield

(23 bbls) Type III + 2% CaCl + .25 pps

flake @ 14.5 ppg & 1.41 yield

75.5 bbls fresh water

###

1000 psi

Full

40 bbls cement

Yes

###

8/

EMW

hrs (plug bump to drlg cm