Form 3160-5 (August 1999)

## **UNITED STATES** DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

## SUNDRY NOTICES AND REPORTS ON WELLS

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

Lease Serial No. NMSF078995

6.	If Indian.	Allottee or	Tribe Name

abandoned well. Use form 3160-3 (APD) for such proposals.					6. If Indian, Allottee or Tribe Name	
SUBMIT IN TRIP	7. If Unit or CA/Agreement, Name and/or No. NMNM78421C					
1. Type of Well	E MAY			8 Well Name and No. SAN JUAN 31-6 UNIT 234A		
Oil Well Gas Well Other  One of Operator	Contact:	PATSY CLUC	STON C	× 147 3	9: API Well No.	
CONOCOPHILLIPS COMPANY		E-Mail: plclugs@ppco.com			_30-039-27336-00-X1	
Ba. Address PO BOX 2197 WL3 4066 HOUSTON, TX 77252		3b. Phone No. (include area code) Ph: 505.599.3454 Fx: 505-599-3442			10. Field and Pool, or Exploratory BASIN FRUITLAND COAL	
Location of Well (Footage, Sec., T.,	, R., M., or Survey Description	1)	A12.3		11. County or Parish, a	nd State
Sec 29 T31N R6W SENW 182 36.87361 N Lat, 107.48610 W				Carin Service	RIO ARRIBA CO	DUNTY, NM
12. CHECK APPR	ROPRIATE BOX(ES) TO	O INDICATE	NATURE	OF NOTICE, I	REPORT, OR OTHER	R DATA
TYPE OF SUBMISSION	N TYPE OF ACTION					
Notice of Intent	☐ Acidize	☐ Deep	en	☐ Produ	ction (Start/Resume)	☐ Water Shut-Off
	☐ Alter Casing	☐ Fract	ure Treat	☐ Reclar	mation	■ Well Integrity
☐ Subsequent Report	□ Casing Repair	☐ New	Construction	n 🗖 Recor	nplete	Other O
☐ Final Abandonment Notice	□ Change Plans	□ Plug and Abandon		n 🗖 Temp	orarily Abandon	Change to Original A PD
	□ Convert to Injection	Plug	Back	■ Water	Disposal	
for a description of what we plan We would also like to deepen to Cliffs Formation.  Plans are to have a mudlogge be faxed to the BLM for their vigas is encounted in the process.	the subject well to allow or on site to verify that PC verfication. The maximul ss, we will plug back to the	gas isn't enco	ountered an	d the mud logs to is 3500'. If	s will	
	Electronic Submission For CONOCOP mmitted to AFMSS for pro	HILLIPS COMP	AŇY. sent t	o the Farmingto	on -	
Name (Printed/Typed) PATSY CL	LUGSTON		Title AU	THORIZED RE	EPRESENTATIVE	
Signature (Electronic S	Submission)		Date 05	15/2003		
	THIS SPACE F	OR FEDERA	L OR STA	TE OFFICE	USE	
Approved By CHIP HARRADEN			TitleGEOLOGIST		Date 05/16/2003	
Conditions of approval, if any, are attached. Approval of this notice does not war vertify that the applicant holds legal or equitable title to those rights in the subject which would entitle the applicant to conduct operations thereon.			Office Far			, 55, 15, 2500
Title 18 U.S.C. Section 1001 and Title 43	U.S.C. Section 1212, make it			ly and willfully to	make to any department or	agency of the United