

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

MAY 13 2013

FORM APPROVED  
OMB No. 1004-0137  
Expires: July 31, 2010

**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-078740**  
6. If Indian, Allottee or Tribe Name

*SUBMIT IN TRIPLICATE - Other instructions on page 2.*

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		7. If Unit of CA/Agreement, Name and/or No. San Juan 30-5 Unit
2. Name of Operator <b>ConocoPhillips Company</b>		8. Well Name and No. <b>San Juan 30-5 Unit 216 POW</b>
3a. Address <b>PO Box 4289, Farmington, NM 87499</b>	3b. Phone No. (include area code) <b>(505) 326-9700</b>	9. API Well No. <b>30-039-24828</b>
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) <b>Surface UNIT M (SWSW), 1086' FSL &amp; 1015' FWL, Sec. 20, T30N, R5W</b>		10. Field and Pool or Exploratory Area <b>Basin Fruitland Coal</b>
		11. Country or Parish, State <b>Rio Arriba, New Mexico</b>

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

TYPE OF SUBMISSION	TYPE OF ACTION			
<input checked="" 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 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"/> Other <b>MIT</b>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<b>Pressure Observation</b>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	<b>Well</b>

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 must 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 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

**ConocoPhillips intends to perform an MIT test on subject well as per the NMOCD regulations requiring MIT every 5 years. The last MIT was performed 7/14/2008. Procedure is attached.**

RCVD MAY 23 '13  
OIL CONS. DIV.  
DIST: 3

**Notify NMOCD 24 hrs prior to beginning operations**

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) <b>DENISE JOURNEY</b>		Regulatory Technician	
Signature <i>Denise Journey</i>		Title	Date <b>5/10/2013</b>

**THIS SPACE FOR FEDERAL OR STATE OFFICE USE**

Approved by <b>Original Signed: Stephen Mason</b>	Title	Date <b>MAY 20 2013</b>
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.

(Instruction on page 2)

NMOCD

**ConocoPhillips**  
**SAN JUAN 30-5 UNIT 216 POW**  
**Expense - MIT**

Lat 36° 47' 36.996" N

Long 107° 23' 7.944" W

**PROCEDURE**

**Notify NMOCD 48 hours in advance to witness MIT testing**

1. Hold pre-job safety meeting. Comply with all NMOCD, BLM, and COPC safety and environmental regulations.
2. MIRU pump truck. Check casing, tubing, and bradenhead pressures and record them in **Wellview**. **If there is pressure on the BH, contact engineer to review complete BH history and get a gas analysis done.**
3. RU hose from pump truck and connect to the casing. Verify that casing is filled with proper fluid.
4. MIT casing to 560# for 30 minutes on a 2 hour chart with a 1000# spring maximum. If the test passes, SI the well. RD pump and MOL. Bring the chart to the Production Engineer. If the test fails, contact the Rig Superintendent and Production Engineer.

Current Schematic

ConocoPhillips

Well Name: SAN JUAN 30-5 UNIT #216

API/ UWI 3003924828	Surface Legal Location NMPM-30N-05W-20-M	Field Name FC	License No.	State/ Province NEW MEXICO	Well Configuration Type Vertical	Edit
Ground Elevation (ft) 6,275.00	Original KB/RT Elevation (ft) 6,287.00	KB-Grnd Distance (ft) 12.00	KB-Casing Flange Distance (ft)	KB-Tubing Hanger Distance (ft)		

Well Config: Vertical - Original Hole, 5/8/2013 7:39:38 AM

