

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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

OCT 17 2013

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-078460**
6. If Indian, Allottee or Tribe Name

1. Type of Well

Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No. **San Juan 32-7 Unit**
8. Well Name and No. **San Juan 32-7 Unit 247**
9. API Well No. **30-045-32832**
10. Field and Pool or Exploratory Area **Basin Fruitland Coal**

2. Name of Operator **ConocoPhillips Company**

3a. Address **PO Box 4289, Farmington, NM 87499**
3b. Phone No. (include area code) **(505) 326-9700**

4. Location of Well (Footage, Sec., T., R., M., or Survey Description) **Surface UNIT N (SESW), 1125' FSL & 1746' FWL, Sec. 7, T32N, R7W**

11. Country or Parish, State **San Juan, New Mexico**

12. CHECK THE 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"/> Other <u>Legacy</u>
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	<u>Reclamation</u>
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

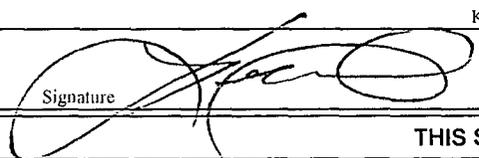
13. Describe Proposed or Completed Operation: Clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleat horizontally, give subsurface locations and measured and true vertical depths 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 recompleat 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 Company completed the Legacy reclamation of the location on 8/15/13, as requested by Mike Flaniken during the onsite inspection. The Legacy seeding was completed on 8/16/13. Please schedule a field inspection to verify ConocoPhillips has met the BLM requirements on requirements on this reclamation work.

OIL CONS. DIV DIST. 3
OCT 29 2013

ACCEPTED FOR RECORD

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FARMINGTON FIELD OFFICE
BY

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed) **Kenny Davis** Title **Staff Regulatory Technician**
Signature  Date **10/14/2013**

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.

(Instruction on page 2)

NMOCDCa

List 15



Legacy

Reclamation Form:

Date: 10-3-2013

Well Name: SS 32-7 247

Footages: 1125 FSL, 1746 FWL Unit Letter: _____

Section: 7, T-32-N, R-7-W, County: SS State: WY

Reclamation Contractor: Aztec

Reclamation Start Date: 8-15-2013

Reclamation Complete Date: 8-15-13

Road Completion Date: 8-15-13

Seeding Date: 8-16-13

**PIT MARKER STATUS (When Required): Picture of Marker set needed

MARKER PLACED : _____ (DATE)

LATITUDE: _____

LONGITUDE: _____

Pit Manifold removed _____ (DATE)

Construction Inspector: Norman Faver Date: 10-3-2013

Inspector Signature: Norman Faver

Office Use Only: Subtask _____ DSM _____ Folder _____ Pictures _____

53 32-7 247

