

Submitted in lieu of Form 3160-5 (June 1990)

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

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.

FORM APPROVED

Budget Bureau No. 1004-0135

Expires: March 31, 1993

RECEIVED

JAN 30 2015

Bureau of Land Management

1. Type of Well:

Gas

2. Name of Operator:

ConocoPhillips

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 2510' FNL & 10' FWL
S: 28 T: 028N R: 007W U: E

5. Lease Number:

SF-078498

6. If Indian, allottee or Tribe Name:

7. Unit Agreement Name:

NMNM-78413C-DK NAUNM-78413A-NM

8. Well Name and Number:

SAN JUAN 28-7 UNIT 193F

9. API Well No.

3003927048

10. Field and Pool:

DK - BASIN::DAKOTA
MV - BLANCO::MESAVERDE

11. County and State:

RIO ARRIBA, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

- | | | |
|---|--|--|
| <input type="checkbox"/> Notice of Intent | <input type="checkbox"/> Recompletion | <input type="checkbox"/> Change of Plans |
| <input checked="" type="checkbox"/> Subsequent Report | <input type="checkbox"/> Plugging Back | <input type="checkbox"/> New Construction |
| <input type="checkbox"/> Final Abandonment | <input type="checkbox"/> Casing Repair | <input type="checkbox"/> Non-Routine Fracturing |
| <input type="checkbox"/> Abandonment | <input type="checkbox"/> Altering Casing | <input type="checkbox"/> Water Shut Off |
| | <input checked="" type="checkbox"/> Other- Re-Delivery | <input type="checkbox"/> Conversion to Injection |

13. Describe Proposed or Completed Operations

This well was re-delivered on 12/11/2014 and produced natural gas and entrained hydrocarbons.

Notes: REDELIVERED SHUT IN FOR MORE THAN 90 DAYS DUE TO DOWNHOLE ISSUES

TP: 242 CP: 242 Initial MCF: 64
Meter No.: 98851
Gas Co.: ENT
Proj Type.: REDELIVERY

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FEB 09 2015
NMOCD
DISTRICT III

14. I Hereby certify that the foregoing is true and correct.

Signed

Denise Journey
Denise Journey

Title: Staff Regulatory Tech.

Date: 1/28/2015

ACCEPTED FOR RECORD

(This Space for Federal or State Office Use)

APPROVED BY: ACCEPTED FOR RECORD

Title:

FEB 04 2015
FARMINGTON FIELD OFFICE
BY: *CM*

CONDITION OF APPROVAL, if any:

NMOCD KC