Form 3160-5 (April2004)

## UNITEDSTATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORMAPPROVED OM B No. 1004-0137 Expires: March 31, 2007

## 5. Lease Serial No.

	SF 078410
Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.	6. If Indian, Allottee of Tribe Name
SUBMIT IN TRIPLICATE - Other instructions on reverse side.	7. If Unit or CA/Agreement, Name and/or No
1. Type of Well X Gas Well Other	0.777.11.77
2. Name of Operator	8/Well Name and No. SAN JUAN 29-5 UNIT 4C
CONOCOPHILLIPS CO.	9. API Well No.
3a. Address 3b. PhoneNo. (include area code) P.O. BOX 2197 WL3 6108 HOUSTON TX 77252 (832)486-2326	30-039-29351 10. Field and Pool, or Exploratory Area
4. Location of Well (Footage, Sec., T., R., M., or Survey Description)	BLANCO MESAVERDE
2435 NORTH 2315 WEST UL: F, Sec: 6, T: 29N, R: 5W	11. County or Parish, State RIO ARRIBA NEW MEXICO
12. CHECK APPROPRIATE BOX(ES)TO INDICATE NATURE OF NOTICE, I	REPORT, OR OTHER DATA
TYPE OF SUBMISSION TYPE OF ACTION	
Acidize Deepen Production (State Notice of Intent Alter Casing Fracture Treat Reclamation	tart/Resume)
Subsequent Report  AlterCasing FractureTreat Reclamation  Casing Repair New Construction Recomplete	X OtherAPD extension
Change Plans Plugand Abandon Temporarily A	bandon
Final Abandonment Notice Convert to Injection PlugBack Water Disposa	d
ConocoPhillips requests approval to extend the APD on this well for an additional year.  This approval superes:  DEC 14 2006	2006 JAN 15 070 FAR
E ON ONE . S.	
	8 PM 12 21  OEIVED MINGTON HA  8 9 W 77
14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	8 PM 12 21  OEIVED MINGTON HA  8 9 W 77
14. I hereby certify that the foregoing is true and correct Name (Printed Typed) DEBORAH MARBERRY Title REGULATORY	0EIVED 0EIVED 21 Y ANALYST
14. I hereby certify that the foregoing is true and correct Name (Printed Typed)  DEBORAH MARBERRY  Signature  Leloute Market Date 01/17/2006	0EIVED 0EIVED 21 Y ANALYST