UNITEDSTATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT

FORMA	PPROVED	
OM B N	 o. 1004-0137 	
Expires:	March 31,	2007

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SHINDBA	NOTICES	REPORTS	Ω N	WELL	2

5. Lease Serial No.	
SF 078277	
6 If Indian Allottee or Tribe Name	

Do not use this form for proposals to drill or to re-enter abandoned well. Use Form 3160-3 (APD) for such proposes SUBMIT IN TRIPLICATE - Other instructions on reverse 1. Type of Well OilWell Signature Other 2. Name of Operator CONOCOPHILLIPS CO. 3a. Address 3b. PhoneNo. (include are P.O. BOX 2197 WL3 6108 HOUSTON TX 77252 (832)486-2326 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 305 SOUTH 2005 EAST	Side. 7. If Unit or CA/Agreement, Name and/or No. 8. Well Name and No. SAN JUAN 29-5 UNIT 62M 9. API Well No.
1. Type of Well OilWell S GasWell Other 2. Nameof Operator CONOCOPHILLIPS CO. 3a. Address P.O. BOX 2197 WL3 6108 HOUSTON TX 77252 (832)486-2326 4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 305 SOUTH 2005 EAST	8. Well Name and No. SAN JUAN 29-5 UNIT 62M 9. API Well No.
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CONOCOPHILLIPS CO. a. Address P.O. BOX 2197 WL3 6108 HOUSTON TX 77252 (832)486-2326 b. Location of Well (Footage, Sec., T., R., M., or Survey Description) 805 SOUTH 2005 EAST	9. API Well No.
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P.O. BOX 2197 WL3 6108 HOUSTON TX 77252 (832)486-2326 Location of Well (Footage, Sec., T., R., M., or Survey Description) 805 SOUTH 2005 EAST	an anda) 30-030-20385
Location of Well (Footage, Sec., T., R., M., or Survey Description)	
	10. Field and Pool, or Exploratory Area BLANCO MESAVERDE / BASIN DA
III.O Con 7 T. 20N D. EW	11. County or Parish, State
JL: O, Sec: 7, T: 29N, R: 5W	RIO ARRIBA NEW MEXICO
12. CHECK APPROPRIATE BOX(ES)TO INDICATE NATURE O	OF NOTICE, REPORT, OR OTHER DATA
TYPEOF SUBMISSION TYPEO	OF ACTION
Acidize Deepen	Production (Start/Resume) Water Shut-Off
X Notice of Intent	Reclamation Well Integrity
Subsequent Report Casing Repair New Construction	Recomplete X Other EXTENSION
Change Plans Plug and Abandon	Temporarily Abandon
Final Abandonment Notice Convert to Injection PlugBack	WaterDisposal
Approval extended until 4	14/07
To the state of th	
a state of the contract of the	7 (11/1/20%)
	O F
AP AP	REC PARL
	PERIFO PI ER P
	ons. DIV.
Marie	
4. Thereby certify that the foregoing is true and correct	<u> </u>
Name (Printed/Typed)	
DEBORAH MARBERRY Title RE	GULATORY ANALYST
Signature A shorah Mallelly Date 04/	19/2006
THIS SPACE FOR FEDERAL OR STAT	TE OFFICE USE
Approved by Title	Date 4/25/06
Conditions of approval, if any, are attached. Approval of this notice does not warrant or ertify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	
14. I hereby certify that the foregoing is true and correct	ONS. DIV. 3

(Instructions on page 2)

