Form 3160-5 (April2004)

DEP BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

UNITEDSTATES	
ARTMENT OF THE INTERIOR	
EALLOE LAND MANACEMENT	

FORMAR	PROVED 1004-0137 March 31, 2007
OM B No	1004-0137
Expires:	March 31, 2007

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Do not use thi abandoned we	6. If Indian, Allottee or Tribe Name			
	PLICATE - Other ins	trû ệţiộ n§[pn 7e ver	senside. 18	7. If Unit or CA/Agreement, Name and/or No. SAN JUAN 32-7 UNIT
1. Type of Well 2. Nameof Operator ConocoPhillips Company 3a. Address PO BOX 4289 Farmingtor 4. Location of Well (Footage, Sec 2171 SOUTH 2088 EAST UL:J, Sec: 19, T: 32N, R:	., T., R., M., or Survey Descr	RECEI 070 FARMIN 3b. PhoneNo.(includ (505)326-95 iption)	IGTOM NM e area code)	8. Well Name and No. SAN JUAN 32-7 UNIT 240A 9. API Well No. 30-045-33031 10. Field and Pool, or Exploratory Area BASIN FRUITLAND COAL 11. County or Parish, State SAN JUAN NM
12. CHECK AP	PROPRIATE BOX(ES)T	O INDICATE NATUI	RE OF NOTICE, I	REPORT, OR OTHER DATA
TYPE OF SUBMISSION		TY	PEOF ACTION	
Noticeof Intent Subsequent Report Final Abandonment Notice	Acidize AlterCasing Casing Repair Change Plans Convert to Injection	Deepen FractureTreat New Construction Plug and Abandon Plug Back	Production (S Reclamation Recomplete Temporarily A Water Disposa	Well Integrity [X] Other 7" PT Casing Abandon
If the proposal is to deepen dire Attach the Bond under which the following completion of the inv	ctionally or recomplete horizon ne work will be performed or prolyed operations. If the operational Abandonment Notices shall for final inspection.) rgy Rig 18.	tally, give subsurface locati rovide the Bond No. on file on results in a multiple com be filed only after all requir	ons and measured and with BLM/BIA. Req pletion or recompletion	of any proposed work and approximate duration thereof true vertical depths of all pertinent markers and zones usired subsequent reports shall be filed within 30 days in a new interval, a Form 3160-4 shall be filed once amation, have been completed, and the operator has
				SEP 2 2 2006 FARMINGTON FIELD, OFFICE BY 100 Y

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	<u></u>				
	Γitle	Regulatory Specialist			
Signature Hunt Jaul	Date	09/15/2006			
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 warran certify that the applicant holds legal or equitable title to those rights in the subject lewhich 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.

