

submitted in lieu of Form 3160-5
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RCVD MAR12'07
OIL CONS. DIV.

DIST. 3

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator
ConocoPhillips

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

Surf: Unit A (NENE), 710' FNL & 925' FEL, Section 26, T30N, R5W, NMPM

5. Lease Number
SF-078738
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name
San Juan 30-5 Unit
8. Well Name & Number
San Juan 30-5 Unit #247R
9. API Well No.
30-039-29233
10. Field and Pool
Basin Fruitland Coal
11. County and State
Rio Arriba Co., NM

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

Type of Submission	Type of Action
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Altering Casing
	<input type="checkbox"/> Change of Plans
	<input type="checkbox"/> Non-Routine Fracturing
	<input type="checkbox"/> Water Shut off
	<input type="checkbox"/> Conversion to Injection

☒ Other—Extension on APD

13. Describe Proposed or Completed Operations

Wish to extend the APD expiration date on this well.

THIS APPROVAL EXPIRES 3/30/08

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

Signed Rhonda Rogers Rhonda Rogers Title Regulatory Technician Date 3/6/07

(This space for Federal or State Office use)

APPROVED BY _____ Title _____ Date _____

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

NMOC

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