

UNITED STATES  
DEPARTMENT OF THE INTERIOR  
BUREAU OF LAND MANAGEMENT

FORM APPROVED

Budget Bureau No 1004-0135

Expires March 31, 1993

**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

5. Lease Designation and Serial No

**NMNM013885**

6. If Indian, Allottee or Tribe Name

**SUBMIT IN TRIPLICATE**

1. Type of Well

☐

Oil Well

☒

Gas Well

☐

Other

2. Name of Operator

**Synergy Operating, LLC**

3. Address and Telephone No.

**P.O. Box 5513, Farmington, NM 87499**

**(505) 325-5449**

4. Location of Well (Footage, Sec, T. R., M, or Survey Description)

**1955' FSL, 885' FWL, Sec 24, T29N-R12W (Unit Ltr : L)**

7. If Unit or CA, Agreement Designation

**Federal**

8. Well Name and No.

**Federal 29-12-24 #101**

9. API Well No.

**30-045-32852**

10. Field and Pool, or Exploratory

**Basin Fruitland Coal**

11. County or Parish, State

**San Juan Co., NM**

12. CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA

TYPE OF SUBMISSION

☐

Notice of Intent

☒

Subsequent Report

☐

Final Abandonment Notice

TYPE OF ACTION

☐

Abandonment

☐

Recompletion

☐

Plugging Back

☐

Casing Repair

☐

Altering Casing

☒

Other: 1st Delivery

☐

Change of Plans

☐

New Construction

☐

Non-Routine Fracturing

☐

Water Shut-Off

☐

Conversion to Injection

☐

Dispose Water

(Note: Report results of multiple completion on Well Completion or recompletion Report and Log Form)

13. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including, estimated date of starting work.

If well is directionally drilled give subsurface locations and measured and true vertical depths for all markers and zones of pertinent to this work.

The well was 1st delivered on July 13, 2005 and produced natural gas and formation water

TP: 0#

CP: 75#

Initial MCF: 30

Meter #: 86098-01

Gas Transporter: Enterprise Field Services


RCVD AUG 23 '07

OIL CONS. DIV.

DIST. 3

ACCEPTED FOR RECORD

AUG 20 2007

FARMINGTON DISTRICT OFFICE  
BY 

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

Signed: 

Title: Operations Manager

Date: 8/17/2007

This space for federal or state office use

Approved by: \_\_\_\_\_

Title: \_\_\_\_\_

Date: \_\_\_\_\_

Conditions of approval if any

NMAOCD

