UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

FORM APPROVED

Budget Bureau No. 1004-0135

RECEIVED

Expires: March 31, 1993

FEB 04 2010

Use "APPLICATION FOR PERMIT" - for such proposals.

Dureau of Land Management
Farminaton Field Office

5. Lease Number:

| 1. Type of Well: | | | 5. Lease Number: | | | | | | |
|--|-------------------------|---|--|--|---------------------------|--------------------|-------------------------|--------------------------|--|
| Gas | | | FEE | | | | | | |
| 2. Name of Operator: ConocoPhillips 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 (505) 326-9700 | | | 6. If Indian, allottee or Tribe Name: 7. Unit Agreement Name: NINT 18419A (MV) 8. Well Name and Number: | | | | | | |
| | | | | | 4. Location of Well, Foot | age, Sec. T. R. U: | | _ SAN JUAN 30-5 UNIT 81P | |
| FOOTAGE: 1505' FNL & 1550' FWL | | | 9. API Well No. | | | | | | |
| S : 27 T : | 030N R: 005W U | : F | 3003930800 | | | | | | |
| | | | 10. Field and Pool: | | | | | | |
| , | | | DK - BASIN::DAKOTA MV - BLANCO::MESAVERDE 11. County and State: | | | | | | |
| | | | | | | | | RIO ARRIBA, NM | |
| | | | | | 12. CHECK APPROPRIAT | TE BOX TO INDICATE | NATURE OF NOTICE, REPOR | T, OTHER DATA | |
| Notice of Intent Recompletion | | | Change of Plans | | | | | | |
| X Subsequent Report | | Plugging Back | New Constr | New Construction | | | | | |
| Final Abandonment | | Casing Repair | Non-Routine | Non-Routine Fracturing | | | | | |
| Abandonment | | Altering Casing | Water Shut Off | | | | | | |
| 5100 A 1000 A 1700 | - 120 | X Other-First Delivery | Conversion | Conversion to Injection | | | | | |
| Notes: THIS WE | ELL WAS DELIVERED | nd produced natural gas and en THROUGH GAS RECOVERY C R ON 01/26/10. FINISHED THE | COMPLETION. STARTED S | ELLING ON THE MV 01/20/10, .ETION 02/02/10. | | | | | |
| | | | | RCVD FEB 12'10 | | | | | |
| TP: | CP: | Initial MCF: 17802 | | OIL CONS. DIV. | | | | | |
| Meter No.: | 81393 | | | DIST. 3 | | | | | |
| Gas Co.: | WFC | | | vioi. a | | | | | |
| | GAS RECOVERY C | OMPLETION | | | | | | | |
| 14. I Hereby certify that th | ne foregoing is true ar | nd correct. | | | | | | | |
| Signed James Sessions | | , Title: Staff Regulate | ory Tech. Date: 2/ | e: 2/4/2010 | | | | | |
| Space for Federal or State | Office Use) | | | ACCEPTED FOR RECORD | | | | | |
| APPROVED BY: | | Title: | Date: | FEB - 8 2010 | | | | | |
| CONDITION OF APPROVAL, if any: | | | | FARMINGTON STO OFFICE | | | | | |