Submitted in lieu of Form 3160-5 (June 1990) **UNITED STATES DEPARTMENT OF THE INTERIOR BUREAU OF LAND MANAGEMENT** FORM APPROVED SUNDRY NOTICES AND REPORTS ON WELLS Budget Bureau No. 1004=0,135, Expires: March 31, 1993 Do not use this form for proposals to drill or to deepen or reentry to a different reservoir. SFP 01 2010 Use "APPLICATION FOR PERMIT" - for such proposals. farmingon For O fee 1. Type of Well: 5. Lease Number: SF-078426 Bureau of Land Managament Gas 2. Name of Operator: 6. If Indian, allottee or Tribe Name: ConocoPhillips 7. Unit Agreement Name: 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 8. Well Name and Number: (505) 326-9700 SAN JUAN 29-6 UNIT 5N 4. Location of Well, Footage, Sec. T, R, U: 9. API Well No. FOOTAGE: 1515' FNL & 860' FEL 3003930664 S: 25 T: 029N R: 007W U: H 10. Field and Pool: DK - BASIN::DAKOTA MV - BLANCO::MESAVERDE 11. County and State: RIO ARRIBA, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent Recompletion Change of Plans Subsequent Report Plugging Back **New Construction** Final Abandonment Casing Repair Non-Routine Fracturing Abandonment Altering Casing Water Shut Off Conversion to Injection Other-First Delivery 13. Describe Proposed or Completed Operations This well was first delivered on 8/24/2010 and produced natural gas and entrained hydrocarbons. THIS WELL WAS DELIVERED THROUGH GAS RECOVERY COMPLETION. STARTED SELLING ON THE MV 08/24/10, Notes: MV & DK FLOWING TOGETHER ON 08/25/10. FINISHED THE GAS RECOVERY COMPLETION 08/30/10. TP: CP: Initial MCF: 14872 Meter No.: 88869 Gas Co.: **ENT** Proj Type.: GAS RECOVERY COMPLETION 14. I Hereby certify that the foregoing is true and correct. Title: Staff Regulatory Tech. Date: 8/31/2010 Signed

CONDITION OF APPROVAL, if any: NMOCD

(This Space for Federal or State Office Use)

APPROVED BY:

Date: SEP - 2 2010

FARMINGTON LED OFFICE

Title: