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submitted in lieu of Form 3160-5

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

NOV 19 2010

Farmington Field Office
Bureau of Land Management

Sundry Notices and Reports on Wells

<p>1. Type of Well GAS</p> <p>2. Name of Operator ConocoPhillips</p> <p>3. Address & Phone No. of Operator PO Box 4289, Farmington, NM 87499 (505) 326-9700</p> <p>4. Location of Well, Footage, Sec., T, R, M Surface: Unit G (SWNE), 1180' FNL & 2865' FEL, Section 7, T32N, R7W, NMPM Bottomhole: Unit E (SWNW), 747' FNL & 743' FEL, Section 7, T32N, R7W, NMPM FWL</p>	<p>5. Lease Number SF-078460</p> <p>6. If Indian, All. or Tribe Name</p> <p>7. Unit Agreement Name San Juan 32-7 Unit</p> <p>8. Well Name & Number San Juan 32-7 Unit 247H</p> <p>9. API Well No. 30-045-33900</p> <p>10. Field and Pool Basin Fruitland Coal</p> <p>11. County and State San Juan, NM</p>
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12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

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

13. Describe Proposed or Completed Operations

10/11/2010 MIRU AWS 266. NU BOPE. PT BOPE & csg to 2500#/30min. Test – OK. ✓ Tag RBP set @ 2507' & Release.
 10/12/2010 Tag RBP set @ 2604' & Release. RIH w/ Mill. Tag CBP set @ 2863' & M/O.
 10/14/2010 Tag CBP set @ 2865' (set to isolate original wellbore w/ lateral) & M/O.
 10/16/2010 Flow Test FC. ✓
 10/18/2010 RIH w/ 105jts, 2 3/8", 4.7#, J-55 tbg set @ 3315' w/ F-Nipple @ 3281'. ND BOPE. NU WH. RIH w/ RHAZ insert pump & rods. Spaceout. PT tbg to 500# - OK. RD RR @ 18:00hrs on 10/18/10. ✓

RCVD DEC 1 '10
OIL CONS. DIV.
DIST. 3

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

Signed Crystal Tafoya Crystal Tafoya Title Staff Regulatory Technician Date 11/19/10

(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

