Submitted in lieu of Form 3160-5 (June 1990)

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.

Use "APPLICATION FOR PERMIT" - for such proposals.

United States any false, fictitious or fraudulent statements.

FORM APPROVED

Budget Bureau No. 100440135

Expires: March 31, 1993

FEB 04 2011

		5 ^{ra} 211 4 4 2 -	
1. Type of Well:		5. Lease Number: Bureau of Land Ma	i Offic. nagemer
Gas		SF-079353	
2. Name of Operator: ConocoPhillips		6. If Indian, allottee or Tribe Name:	
		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 32-8 UNIT 4	
4. Location of Well, Footage, Sec. T, R, U:		9. API Well No.	
FOOTAGE: 1500' FSL & 1650' F	WL,	3004511414	
S: 15 T: 032N R: 008W	/ u : K	40 70 11 470 4	
		10. Field and Pool:	
		PC - ALBINO::PICTURED CLIFFS	
		11. County and State:	
		SAN JUAN, NM	

12. CHECK APPROPRIATE BOX TO INDIC.	ATE NATURE OF NOTICE, REPO	RT, OTHER DATA	
Notice of Intent	Recompletion	Change of Plans	
X Subsequent Report	Plugging Back	New Construction	
Final Abandonment	Casing Repair	Non-Routine Fracturing	
Abandonment	Altering Casing	Water Shut Off	
	X Other- Re-Delivery	Conversion to Injection	
13. Describe Proposed or Completed Open			And the state of t
This well was re-delivered on 11/2/201	0 and produced natural gas and en	trained hydrocarbons.	
Notes: THIS WELL WAS SHUT IN	MORE THAN 90 DAYS DUE TO E	QUIPMENT REPAIR	2137475
		29,10	A 62
		A BE	21374757677 ACEIVED 302217 B 2017
TP: 1018 CP: 1	1020 Initial MCF: 289	49	CEIVED &
11. 1010	middi Moi . 200	98	B 2011 8
Meter No.: 85468		/S OIL CON	IS DIV
Gas Co.: WFC			4. 014 N 15
		Acon.	وران ور
Proj Type.: REDELIVERY		29.5	8312 31 A
14. I Hereby certify that the foregoing is tru	ue and correct.		
Signed Tom Almin	Title: Staff Regula	atory Tech. Date: 2/3/2011	
Tamra Sessions	Julie. Clair regula	acty (cost. Date. 2707201)	
Tamra Jessions			
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•			00:
APPROVED BY:	Title:	Date: [53 - 4	<u> </u>
CONDITION OF APPROVAL, if any:		M. D. Jan	2. :
CONDITION OF ALTROVAL, II dily.		<u></u>	