

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0115
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

SUBMIT IN TRIPLICATE

1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other	5. Lease Designation and Serial No. SF 78835A
2. Name of Operator CONOCO INC.	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 10 DESTA DR. STE. 100W, MIDLAND, TX. 79705-4500 (915) 686-5424	7. If Unit or CA, Agreement Designation
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) A Section 6, T-27-N, R-7-W 1150 FNL & 910 FEL	8. Well Name and No. San Juan 28-7 # 168
	9. API Well No. 30-039-20695
	10. Basis of Title of Coal, Blaine Pictured Cliffs South
	11. County or Parish, State Rio Arriba

CHECK APPROPRIATE BOX(S) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION	TYPE OF ACTION	
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input type="checkbox"/> Subsequent Repon	<input checked="" type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> Non-Routine Fracuring
	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Conversion to Injection
	<input type="checkbox"/> Other _____	<input type="checkbox"/> Dispose Water

INote: Repon resultsof multiplecompletionWdl Completion or Recompletion Report and Log form.)

3. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)*

This well will be recompleted to the Fruitland Coal using the attached procedure.

RECEIVED
FEB - 3 1998
OIL CON. DIV.
DIST. 3

*** The Fruitland Coal And the Pictured Cliffs will be downhole commingled in this well upon approval.

14. I hereby certify that the foregoing is true and correct	Kay Maddox	
Signed <i>Kay Maddox</i>	Title Regulatory Agent	Date Jan 24, 1998
(This space for Federal or State office use)		
Approved by /s/ Duane W. Spencer	Title _____	Date JAN 30 1998
Conditions of approval if any _____		

BLM(6), NMOCD(1), SHEAR, PONCA, COST ASST, FILE ROOM

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make to any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction.

*See Instruction on Reverse Side
NMOCD

**San Juan 28-7 Unit #168
Fruitland Coal Recompletion Procedure**

1. Hold safety meeting. MIRU workover unit. If necessary, kill well with a minimum of 1 % KCl. NU BOP.
2. Abandon Chacra by placing cement from PBTD to 2700'. (approximately 35 cu ft)
Tag and pressure test to make sure cement is placed.
3. RU wireline unit and RIH w/ 2 7/8" Composite bridge plug above PC @ 2680'. Test casing to 4000 psi.
4. MU 1 11/16" HSC or Strip perforating guns w/ 4 spf & 11gm charges w/ GR . Correlate to attached log section and perforate from bottom-up the following depths:

Note: Will require several perforating runs. Review w/ perforating company to accomplish task in the fewest # of runs.

<u>Zone</u>	<u># ft</u>	<u># shots</u>
2493' - 2497'	4	16
2501' - 2505'	4	16
2513' - 2524'	11	44
2529' - 2543'	14	56
2592' - 2594'	2	8
2627' - 2637'	7	28
2654' - 2662'	8	32
Total	50	200

5. Set up to pump down both strings of casing. Frac per attached schedule. Clean location and release frac equipment.
6. RU compressors and drill out bridge plug w/ gas. Clean out PC string to well to PBTD (2903'). Clean out Plugged back string (formerly Chacra) to 2700'
Jet well until it will flow on its own. Drywatch as necessary.
7. ND BOP and NU wellhead. Produce well through both casing strings.
8. Record and notify necessary personnel for regulatory and gas allocation purposes.
8. RDMO workover unit.
9. Thank You.

District I
PO Box 1980, Hobbs, NM 88241-1980

State of New Mexico
Energy, Minerals & Natural Resources Department

Form C-102
Revised February 21, 1994
instructions on back
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

District II
PO Drawer DD, Artesia, NM 88211-0719
District III
1000 Rio Brazos Rd. Aztec, NM 87410
District IV
PO Box 2088, Santa Fe, NM 87504-2088

OIL CONSERVATION DIVISION
PO Box 2088
Santa Fe, NM 87504-2088

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-20695	2 Pool Code 71629	3 Pool Name Basin Fruitland Coal
4 Property Code 016608	5 Property Name San Juan 28-7 Unit	6 Well Number 168
7 CGRID No. 005073	8 Operator Name Conoco Inc., 10 Destal Drive, Ste. 100W, Midland, TX 79705-4500	9 Elevation 6175' GL

10 Surface Location

Utah/Idaho	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
A	6	27N	7W		1150	North	910	East	Rio Arriba

11 Bottom Hole Location If Different From Surface

UL Parcel No.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
---------------	---------	----------	-------	---------	---------------	------------------	---------------	----------------	--------

12 Dedicated Acres 320-60	13 Joint or Infill	14 Consolidation Code	15 Order No.
------------------------------	--------------------	-----------------------	--------------

NO ALLOWABLE WILL BE ASSIGNED TO THIS COMPLETION UNTIL ALL INTERESTS HAVE BEEN CONSOLIDATED
OR A NON-STANDARD UNIT HAS BEEN APPROVED BY THE DIVISION

16				1150'	910'	17 OPERATOR CERTIFICATION	
						I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.	
						Signature	Kay Maddox
						Printed Name	Kay Maddox
						Title	Regulatory Agent
						Date	January 8, 1998
RECEIVED FEB 17 1998 OIL CON. DIV. DIST. 3						18 SURVEYOR CERTIFICATION	
						I hereby certify that the well location shown on this plat was plotted from field notes of actual surveys made by me or under my supervision, and that the same is true and correct to the best of my belief.	
						Date of Survey	
						Signature and Seal of Professional Surveyor	
						Certificate Number	