

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
Budget Bureau No. 1004-0135
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		5. LEASE DESIGNATION AND SERIAL NO SF 078673
SUBMIT IN TRIPLICATE		6. IF INDIAN, ALLOTTEE OR TRIBE NAME
1. TYPE OF WELL OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	7. IF UNIT OR CA, AGREEMENT DESIGNATION Schlosser WN Fed	
2. NAME OF OPERATOR CONOCO INC.	8. WELL NAME AND NO. #4	
3. ADDRESS AND TELEPHONE NO. P.O. Box 2197, DU 3066, Houston, TX 77252-2197 (281) 293-1613	9. API WELL NO. 30-045-07055	
4. LOCATION OF WELL (Footage, Sec., T., R., M., or Survey Description) 1070' FNL 1130' FEL, Section 34, T28N, R11W, Unit Letter A	10. FIELD AND POOL, OR EXPLORATORY AREA BASIN DAKOTA	
11. COUNTY OR PARISH, STATE San Juan County		
12. CHECK APPROPRIATE BOX(s) TO INDICATE NATURE OF NOTICE, REPORT, OR OTHER DATA		
TYPE OF SUBMISSION		TYPE OF ACTION
<input type="checkbox"/> Notice of Intent <input checked="" type="checkbox"/> Subsequent Report <input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Abandonment <input type="checkbox"/> Recompletion <input type="checkbox"/> Plugging Back <input type="checkbox"/> Casing Repair <input type="checkbox"/> Altering Casing <input checked="" type="checkbox"/> Other: <u>Repair Casing Leak</u> <input type="checkbox"/> Change of Plans <input type="checkbox"/> New Construction <input type="checkbox"/> Non-Routine Fracturing <input type="checkbox"/> Water Shut-Off <input type="checkbox"/> Conversion to Injection <input type="checkbox"/> Dispose Water <small>(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log Form.)</small>	
13. 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.) 7/12/00 Held safety meeting. MIRU 7/13/00 Held safety meeting. RU - NDWH - NUBOP. Opened well up - bleed well down. Tagged at 6181' - no fill. PBTD at 6181'. POOH with 2-3/8" production string. Tubing had scale on outside of pipe from 3100' to 6030'. No scale on inside pipe. RIH with 4-1/2" RBP and PKR on 2-3/8" work string to 3100' - could not go down any further due to scale. POOH with RBP and 2-3/8" work string. SWION. 7/14/00 Held safety meeting. Opened well up - bleed well down. RIH with 4-1/2" BIT and scraper on 2-3/8" work string to PBTD 6181'. POOH with bit and scraper. RIH with 4-1/2" RBP and PKR. Set RBP at 6010' and PKR at 5978'. Tested to 1000#. Held OK. Released PKR - loaded hole with 1% KCL water. Tested casing to 500# for 30 minutes. Held OK. Bleed pressure off. RU swab. Swabbed well down to 3600'. SWI for 2 hours. Run back in with swab - tagged fluid at 3600'. SWION. 7/17/00 Held safety meeting. RIH with swab - tagged fluid at 3600'. Fluid level same as Friday. POOH with 4-1/2" RBP and PKR on 2-3/8" work string. RIH with 2-3/8" production string to 6113' with seat nipple at 6113' to 6114' with mule shoe. End of mule shoe at 6114. Perfs 6033' to 6156'. Drifted tubing with drift on sand line to seat nipple. POOH with drift. RIH with swab tagged fluid at 3600' - swabbed down to seat nipple. NDBOP. NUWH. SWI. RDMO.		
14. I hereby certify that the foregoing is true and correct		
SIGNED <u>Debra Sittner</u> (This space for Federal or State office use)		TITLE <u>DEBRA SITTNER, As Agent for Conoco Inc.</u> DATE <u>8/1/00</u>
APPROVED BY _____ Conditions of approval, if any:		TITLE _____ DATE _____
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

ACCEPTED FOR RECORD

8/14/2000

WOOD