

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

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-078739
2. Name of Operator Phillips Petroleum Company	6. If Indian, Allottee or Tribe Name
3. Address and Telephone No. 5525 Hwy 64 NBU 3004, Farmington, NM 87401 (505) 599-3412	7. If Unit or CA, Agreement Designation San Juan 30-5 Unit
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Unit A, 849' FNL & 1149' FEL Sec. 33, T30N, R5W	8. Well Name and No. 232
	9. API Well No. 30-039-25194
	10. Field and Pool, or Exploratory Area Basin Fruitland Coal
	11. County or Parish, State Rio Arriba, NM

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 type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Plugging Back	<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
	<input checked="" type="checkbox"/> Other As Per NTL-FRA-90-1	<input type="checkbox"/> Dispose Water

(Note: Report results of multiple completion on Well Completion or Recompletion Report and Log form.)

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.)*

Description of cement job to fulfill requirements for protection of usable water zones including the Ojo Alamo Formation, as per NTL-FRA-90-1.

Date: 10-1-92 Time Started: 0145 hrs Time Completed: 0300 hrs
Hole Size 8-3/4" Casing Size 7", 23# Casing Seat 3479 KB Ft:
Turbo Centralizers at 3050', 2962', 2874'.
Spring Type Centralizers at 2609', to 50', (every 5 joints),
Mud Flush Bbls, Spacer 30 Bbls Dye Fresh Water.

Lead Slurry 425 Sx (175 bbls) Poz, 12% Gel & 1/4#/SK Flocele

Mid Slurry ----

Tail Slurry 150 Sx (31.5 bbls) Class B, 1/4#/Sk Flocele

Displaced Plug with 137 Bbls Fresh Water.

Volume Cement Circulated 61/147 Bbls/Sacks

Average Pressure 1100 PSI, Average Rate 3.8 BPM, Bumped Plug with 1900 PSI.

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

Signed R. A. Allred Title Drilling Supervisor Date 10-29-92
(This space for Federal or State office use)

Approved by _____ Title _____ Date _____
Conditions of approval, if any:

ACCEPTED FOR RECORD

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

NA0005

FARMINGTON RESOURCE AREA
BY SMW