Form 3160-5 (June 1990)

UNITED STATES DEPARTMENT OF THE INTERIOR **BUREAU OF LAND MANAGEMENT**

PORM APPROVED Budget Buress No. 1004-0135 Expires: March 31, 1993

5. Lease Désignation and Serial No.

RECEIVE SF-078687

6. If Indian, Allottee or Tribe Nam					
	6.	If Indian.	Allogoe	or Tribe	: Name

	S AND REPORTS ON WELLS	6. If Indian, Allottee or Tribe Name
	Irill or to deepen or reentry to a different reservoir. OR PERMIT—" for such proposals SOFFO 25 P	
		7. If Unit or CA. Agreement Designation
SUBMI	T IN TRIPLICATE	2017
1. Type of Well	MAR 1 0 1999 E	San Juan 32 Fed 8
Well Well Other	and the second s	8. Well Name and No.
2. Name of Operator	OUL COM. DUV.	SJ 32 Fed 8 #1
Phillips Petroleum Company	9. API Well No.	
3. Address and Telephone No.	ngton, NM 87401 (505) 599-3454	30-045-29796 10. Field and Pool, or Exploratory Area
5525 Hwy. 64, NBU 3004, Farmi	<u>i</u>	
4. Location of Well (Footage, Sec., T., R., M., or Survey I	Basin Fruitland Coa	
Unit L, 1845' FSL & 1065'	FWL	II. County of Tana
Section 8, T32N, R9W		San Juan, NM
	A STATE OF LOTION DEPO	
2. CHECK APPROPRIATE BOX	(s) TO INDICATE NATURE OF NOTICE, REPO	AI, OR OTHER DATA
TYPE OF SUBMISSION	TYPE OF ACTION	
Notice of Intent	Abandonment	Change of Plans
	Recompletion	New Construction
Subsequent Report	Plugging Back	Non-Routine Fracturing
'	Casing Repair	Water Shut-Off
Final Abandonment Notice	Altering Casing	Conversion to Injection
	AS Per NTL-FRA-90-1	Dispose Water (Note: Report results of multiple completion on 4
ı		Completion or Recompletion Report and Log for
3. Describe Proposed or Completed Operations (Clearly state a	I pertinent details, and give pertinent dates, including estimated date of starting	any proposed work. If well is directionally dr
	al depths for all markers and zones pertinent to this work.)*	
	ulfill requirements for protection of	usable water zones
including the Ojo Alamo Format Date: 2/9/99 Time St.	ion, as per NTL-FRA-90-1. arted: 10:00 am Time Completed:	12:00 pm
Turbo Centralizers at 1987;	10421 10021	et at <u>3335</u> ft.
Spring Type Centralizers 333	5', 3289', 3243', 3198', 3111'	<u>, 3066' , 2980'& 358</u>
Mud Flush Bbls, Space	er Fresh Water.	,,
Stage 1:	Tron nater.	
Lead Slurry 425 ex 35/65 POZ	Class H w/5#/sx Gilsonite, 1/4#	/sx Cello-flake, 6% o
Mid Slurry	01000 n w/ 3 / 5 01100 n 2 01100 n	
Tail Slurry 100 sx Class H w	/5#/sx Gilsonite, 1/4#/sx Cellof	lake, 0.3% FL-52 2%
Stage 2: CaCl ₂		
Lead Slurry		
Mid Slurry		
Tail Slurry		
	Bbls/Sacks 54 Displaced Plug with	
Average Pressure500 PSI, A	verage Rate <u>5</u> BPM, Bumped Plug	with 1500 PSI.
1. I hereby certify that the foregoing is true and correct	4 /	ACCEPTED FOR BEFORE
Signod Clay Clist	Title Regulatory Assistant	ACCEPTED FOR RECORI
(This space for Federal or State office use)		MAR 0 9 1999
Approved by	Tide	Dete MAK U 9 1979
Conditions of approval, if any:		FARMINGTON, FIELD OFFICE
		BY 4

or representations as to any matter within its jurisdiction.

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 foundations state