Submit 3 Copies To Appropriate District Office	pies To Appropriate District State of New Mexico Energy, Minerals and Natural Resources						Reviser	Form C-1 i March 25, 19	
District I 1625 N. French Dr., Hobbs, NM 87240					WELL AP		M 10. 3	111441011 23, 13	Ť
District II 811 South First, Artesia, NM 87210	OIL CONSERVATION DIVISION 1220 South St. Francis Dr. Santa Fe, NM 87505				/ 30 - 039 - 27561 5. Indigate Type of Lease				_
District III 1000 Rio Brazos Rd., Aztec, NM 87410					STATE FEE X				
District IV 1220 S. St. Francis Dr., Santa Fe, NM 87505					6. State O	6. State Oil & Gas Lease No.			
SUNDRY NOTICES AND REPORTS ON WELLS (DO NOT USE THIS FORM FOR PROPOSALS TO DRILL OR TO DEEPEN OR PLUG BACK TO A DIFFERENT RESERVOIR. USE "APPLICATION FOR PERMIT" (FORM C-101) FOR SUCH PROPOSALS.)					7. Lease Name or Unit Agreement Name:				
1. Type of Well: Oil Well Gas Well X Other					San Juan 29-6 Unit 31326				
2. Name of Operator					8. Well No.				
ConocoPhillips Company 217817 3. Address of Operator					SJ 29-6 Unit #242A 9. Pool name or Wildcat				
5525 Highway 64, NBU 3004, Farmington, NM 87401 4. Well Location					Basin Fruitland Coal 71629				
Unit LetterC	700 feet from the	Nor	th 1	ine and	1930	feet from	theb	lest lir	ne
Section 19	Township 29	N	Range	6W	NMPM	•	County	Rio Arrib	a
	10. Elevation (Show who	ether .		RT, GR, e	tc.)				
11. Check A	Appropriate Box to Ind			of Notice	, Report, o	r Other J	Data		
NOTICE OF INT	ENTION TO:			SUE	SEQUEN	IT REPO	ORT OF	= :	
PERFORM REMEDIAL WORK	PLUG AND ABANDON		REMEDI	AL WORK			ALTERIN	NG CASING	
TEMPORARILY ABANDON	CHANGE PLANS		COMMENCE DRILLING OPNS. DPLU ABA					ND DNMENT	
PULL OR ALTER CASING	MULTIPLE COMPLETION		CASING CEMEN	TEST AND ΓJOB	1				
OTHER:			OTHER:	1st	Productio	n Notice			X
12. Describe Proposed or Completed Operations (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work). SEE RULE 1103. For Multiple Completions: Attach wellbore diagram of proposed completion or recompilation.									
Date - 4/14/04 TP - 155 psi CP - 155 psi LP - 115 psi					SA SOLUTION OF THE SAME OF THE	APR 20	oa ?		
Meter - 29633417					100	1.0		Ż.	
Volume - 952 mcfd	namely CODC Management	C	- 0 00 0	"A CDD	1 / P	~			
Transporter - Williams th	rough COPC Manzanares	Syst	e @ 29-6	#4 CDP	· • .		معتبر المعتبر المعتبر المعتبر المعتبر		
_									
I hereby certify that the information above	is true and complete to the be	est of 1	ny knowled	lge and belie	f.				_
SIGNATURE Patsy Chigs			TITLE Regulatory Analyst DATE 4/19/04						
Type or print name	Patsy Clugston					Telephon	e No. 5	05-599-345	4_
(This space for State use)		-					ADD A	7 6	
APPROVED BY Conditions of approval, if any:		TIT _	LE CA	a gas ims	PECTO3, DIST	. Ø DA	TE	1 2004	