

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENTFORM APPROVED
OMB NO. 1004-0135
Expires: November 30, 2000**SUNDRY NOTICES AND REPORTS ON WELLS**
Do not use this form for proposals to drill or to re-enter an abandoned well. Use form 3160-3 (APD) for such proposals.**SUBMIT IN TRIPLICATE - Other instructions on reverse side.**

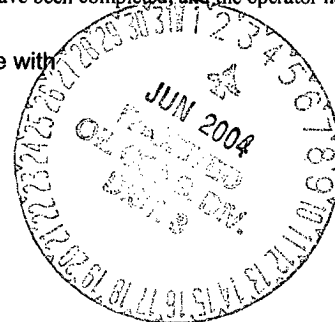
1. Type of Well <input type="checkbox"/> Oil Well <input checked="" type="checkbox"/> Gas Well <input type="checkbox"/> Other		5. Lease Serial No. NMSF 078999
2. Name of Operator CONOCOPHILLIPS		6. If Indian, Allottee or Tribe Name
3a. Address P.O. BOX 2197 WL3 6108 HOUSTON, TX 77252		7. If Unit or CA/Agreement, Name and/or No.
3b. Phone No. (include area code) Ph: 832.486.2326 Fx: 832.486.2764		8. Well Name and No. SAN JUAN 31-6 UNIT 33E
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 34 T31N R6W NWNW 1264FNL 330FWL		9. API Well No. 30-039-25299
		10. Field and Pool, or Exploratory BASIN DAKOTA /BLANCO MESAVER
		11. County or Parish, and State RIO ARRIBA COUNTY, NM

12. CHECK APPROPRIATE BOX(ES) 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"/> Acidize
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Deepen
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Fracture Treat
	<input type="checkbox"/> New Construction
	<input type="checkbox"/> Plug and Abandon
	<input type="checkbox"/> Plug Back
	<input type="checkbox"/> Production (Start/Resume)
	<input type="checkbox"/> Reclamation
	<input checked="" type="checkbox"/> Recomplete
	<input type="checkbox"/> Temporarily Abandon
	<input type="checkbox"/> Water Disposal
	<input type="checkbox"/> Water Shut-Off
	<input type="checkbox"/> Well Integrity
	<input type="checkbox"/> Other

13. Describe Proposed or Completed Operation (clearly state all pertinent details, including estimated starting date of any proposed work and approximate duration thereof. If the proposal is to deepen directionally or recompleate horizontally, give subsurface locations and measured and true vertical depths of all pertinent markers and zones. Attach the Bond under which the work will be performed or provide the Bond No. on file with BLM/BIA. Required subsequent reports shall be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompleation in a new interval, a Form 3160-4 shall be filed once testing has been completed. Final Abandonment Notices shall be filed only after all requirements, including reclamation, have been completed, and the operator has determined that the site is ready for final inspection.)

ConocoPhillips proposes to recomplete this well to the Blanco Mesaverde and downhole commingle with the existing Basin Dakota as per the attached procedure. Also attached is our submittal to the state for the downhole commingle and allocation.



DWC 1481 AZ

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #29684 verified by the BLM Well Information System For CONOCOPHILLIPS, sent to the Farmington Committed to AFMSS for processing by MATTHEW HALBERT on 05/24/2004 ()	
Name (Printed/Typed) DEBORAH MARBERRY	Title SUBMITTING CONTACT
Signature (Electronic Submission)	Date 04/16/2004

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

CONDITIONS OF APPROVAL	
Approved By	Adhere to previously issued stipulations
Conditions of approval, if any, are attached. Approval of this notice does not warrant or certify that the applicant holds legal or equitable title to those rights in the subject lease which would entitle the applicant to conduct operations thereon.	
Office	MMOCD

Title 18 U.S.C. Section 1001 and Title 43 U.S.C. Section 1212, make 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.

**** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ** OPERATOR-SUBMITTED ****



San Juan 31-6 #33E
WELL DATA

API #: 30-039-25299

Location: 31N-6W-34-D

Lat: 36° 51' 35.5356" N **Long:** 107° 27' 26.9892" W 1264' FNL 330' FWL

Elevation: 6583' GLM 6595' KBM:

TD: 8208' **PBTD:** 8200'

Perforations: Dakota: 8022'-8186'

Existing Casing, Tubing and Packer Information

	OD (in)	Depth (ft)	Joints	ID/Drift (Inches)	Weight (#/ft)	Grade	Capacity (bbls/ft)	Burst (psi)	Collapse (psi)	Cmt top
Surface	9 5/8	350	8	8.921/8.765	36	J-55	0.0773	3520	2020	surf
Intermediate	7	3995	94	6.366/6.241	23.0	J-55	0.0394	4360	3270	surf
Production	4 ½	8208	195	4.000/3.875	11.6	N-80	0.0155	7780	6350	2800 by TS
Tubing	2 3/8	7930	253	-	-	N-80	-	-	-	-
	2 3/8" tubing : 1 jt 2 3/8", N-80; 1.81" id F nipple @ 7897; 252 jts 2 3/8" to surface, landed at 7930'									
Packer Setting: N/A										

Artificial lift on well: N/A

PROCEDURE:

1. Notify operator (Mike Kester-505-486-1137) of plans to move on the well.
2. Test anchors prior to moving on location. Last known date of rig work: April 1994
3. Ensure that well is shut in, energy isolated, locked and tagged out; Cathodic protection disconnected. Record SI tbg; SI csg; Braidenhead pressures.
4. Hold pre-job Safety Meeting.
5. MI & RU WO rig.
6. If necessary, kill well w/ 2% KCL water (contingent on Category designation of well; refer to COPC well control manual). ND wellhead and NU BOPE. (refer to COPC well control manual, Sec 6.13). This well is a class 2, category 2 well.
7. Install BPV.
8. ND wellhead and NU BOPE. (refer to COPC well control manual) Test BOPE.

9. Remove BPV.
10. Pick up tubing hanger and tubing, add 9 joints of tubing and tag bottom for fill (PBSD 8200'). Fill has been reported at 8169' (btm perf 8186').
11. TOOH with tubing, standing back. Inspect tubing and replace any bad or crimped joints.
12. RIH with CIBP. Set CIBP at +/- 6000'. Dump 5'-10' sand on top of CIBP. Trip out of hole with setting tool, loading well from the bottom up.
13. RU and install isolation tool.
14. Test casing and plug to 4300#. Verify maximum pressure to be seen during stimulation.
15. If casing doesn't test, isolate leak and contact Houston for squeeze recommendation. If squeeze is needed, contact regulatory agencies prior to pumping cement.

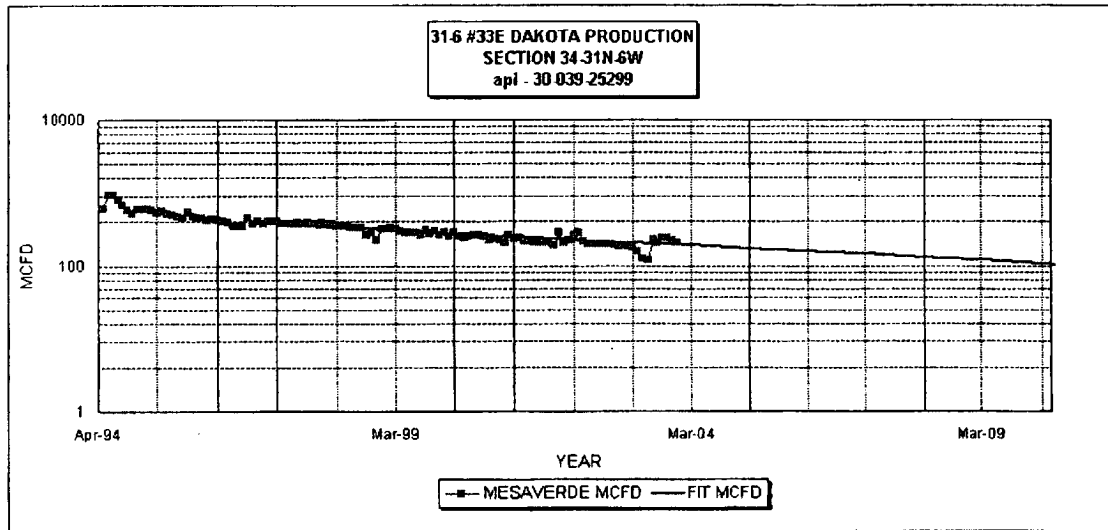
16. RD isolation tool and RU wireline service.

Transition to Completion Engr Procedures

17. Perf and stimulate as per Lucas Bazan's procedure.

Transition back (after flowback)

18. Following clean up and flow back of the Mesa Verde, complete a stabilized, 4 hour C-104 test. Submit results to Debbie Marberry (832) 486-2326 or Yolanda Perez (832) 486-2329.
19. RIH with workstring and mill and mill out CIBP at 6000'.
20. If fill was present in step 6, clean out to PBSD at 8200'.
21. POOH with mill and workstring.
22. Run in with 1.81" Baker F profile nipple, 2 3/8" tubing and land at +/- 8050'. Do not run a joint below the nipple. Drift tubing slowly as running in hole with a 1.901" x 24" diameter drift bar, replicating a plunger run. This well is to be equipped for plunger lift operations and it is imperative to have good tubing drift.
23. Install BPV.
24. NDBOPE and NUWH.
25. Remove BPV.
26. RD MO rig.
27. Turn well over to production. Notify Mike Kester, MSO. Cell # 505-486-1137.
28. Notify Ben Landry (505) 599-2324 and Harry Dee (505) 599-3412 to install plunger lift equipment.
29. Notify cathodic protection personnel after job is complete so cathodic protection equipment can be re-activated. Ensure pit closures done.



PRODUCTION FORECAST FOR SUBTRACTION METHOD COMMINGLE ALLOCATION

NOTE: Current yearly decline rate is approximately 8.5%.
This rate is expected to continue for the duration of the well,
based on production trends observed during the life of this well.
100% of condensate production should be allocated to the MV zone.

YEAR	MID-YEAR AVG MCFD
2004	190
2005	172
2006	157
2007	143
2008	130
2009	118
2010	108
2011	98
2012	89
2013	81
2014	74
2015	67
2016	61
2017	56
2018	51
2019	46
2020	42
2021	38
2022	35
2023	32
2024	29
2025	26
2026	24
2027	22
2028	20
2029	18
2030	16
2031	15
2032	14
2033	12
2034	11
2035	10
2036	9
2037	8
2038	8
2039	7
2040	6

Submit 3 Copies To Appropriate District Office

District I

1625 N. French Dr., Hobbs, NM 88240

District II

1301 W. Grand Ave., Artesia, NM 88210

District III

1000 Rio Brazos Rd., Aztec, NM 87410

District IV

1220 S. St. Francis Dr., Santa Fe, NM

87505

State of New Mexico
Energy, Minerals and Natural Resources

OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-103
Revised June 10, 2003

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.)		WELL API NO. 30-039-25299
1. Type of Well: Oil Well <input type="checkbox"/> Gas Well <input checked="" type="checkbox"/> Other		5. Indicate Type of Lease STATE <input type="checkbox"/> FEE <input type="checkbox"/>
2. Name of Operator CONOCOPHILLIPS CO.		6. State Oil & Gas Lease No.
3. Address of Operator P.O. BOX 2197 WL3 6108 HOUSTON TX 77252		7. Lease Name or Unit Agreement Name SAN JUAN 31-6 UNIT
4. Well Location Unit Letter <u>D</u> : <u>1264</u> feet from the <u>FNL</u> line and <u>330</u> feet from the <u>WEST</u> line Section <u>34</u> Township <u>31N</u> Range <u>6W</u> NMPM County <u>RIO ARRIBA</u>		8. Well Number 33E
11. Elevation (Show whether DR, RKB, RT, GR, etc.) 6580 GL		9. OGRID Number 217817
		10. Pool name or Wildcat BLANCO MESAVERDE / BASIN DAKOTA

12. Check Appropriate Box to Indicate Nature of Notice, Report or Other Data

NOTICE OF INTENTION TO:

PERFORM REMEDIAL WORK ☐ PLUG AND ABANDON ☐
TEMPORARILY ABANDON ☐ CHANGE PLANS ☐
PULL OR ALTER CASING ☐ MULTIPLE COMPLETION ☐

OTHER: DHC ☒

SUBSEQUENT REPORT OF:

REMEDIAL WORK ☐ ALTERING CASING ☐
COMMENCE DRILLING OPNS. ☐ PLUG AND ABANDONMENT ☐
CASING TEST AND CEMENT JOB ☐

OTHER: ☐

13. 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 recompletion.

In reference to Order #R-11363 ConocoPhillips proposes to downhole commingle in the Blanco Mesaverde and Basin Dakota.

Perforations are:

Basin Dakota 8022 - 8186

Blanco Mesaverde 5500' - 5870'

Allocation will be by subtraction as per the attached.

Commingle in this well will not reduce the value of the remaining production.

BLM has been notified of our intent.

In reference to Order #R-11188 interest owners were not notified.

I hereby certify that the information above is true and complete to the best of my knowledge and belief.

SIGNATURE Deborah Marberry TITLE REGULATORY ANALYST DATE 04/15/2004

Type or print name DEBORAH MARBERRY E-mail address: deborah.marberry@conocophillips.com

(This space for State use)

Telephone No. (832)486-2326

APPROVED BY _____ TITLE _____ DATE _____

Conditions of approval, if any:

District I
1625 N. French Dr., Hobbs, NM 88240
District II
1301 W. Grand Avenue, Artesia, NM 88210
District III
1000 Rio Brazos Rd., Aztec, NM 87410
District IV
1220 S. St. Francis Dr., Santa Fe, NM 87505

State of New Mexico
Energy, Minerals & Natural Resources Department
OIL CONSERVATION DIVISION
1220 South St. Francis Dr.
Santa Fe, NM 87505

Form C-102
Revised June 10, 2003
Submit to Appropriate District Office
State Lease - 4 Copies
Fee Lease - 3 Copies

☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-25299		Pool Code 71599		Pool Name BASIN DAKOTA	
Property Code 31328		Property Name SAN JUAN 31-6 UNIT			Well Number 33E
OGRID No. 217817		Operator Name CONOCOPHILLIPS CO.			Elevation 6580 GL

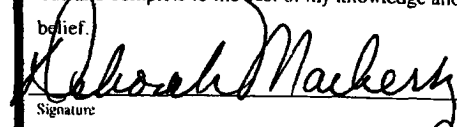
¹⁰Surface Location

UL or lot no. D	Section 34	Township 31N	Range 6W	Lot Idn 1264	Feet from the North/South line FNL	Feet from the East/West line 330	County RIO ARriba
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¹¹Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320 N/2		Joint or Infill I		Consolidation Code		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

<div>1264 330</div>					<p>¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature DEBORAH MARBERRY Printed Name REGULATORY ANALYST deborah.marberry@conocophillips.com Title and E-mail Address 04/15/2004 Date</p>
					<p>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</p>

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Form C-102

Revised June 10, 2003

Submit to Appropriate District Office

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☐ AMENDED REPORT

WELL LOCATION AND ACREAGE DEDICATION PLAT

API Number 30-039-25299		Pool Code 72319	Pool Name BLANCO MESAVERDE
Property Code 31328	Property Name SAN JUAN 31-6 UNIT		Well Number 33E
OGRID No. 217817	Operator Name CONOCOPHILLIPS CO.		Elevation 6580 GL

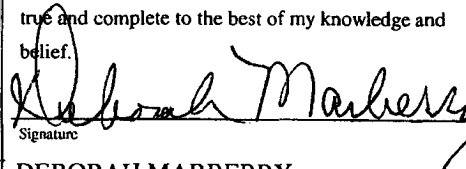
¹⁰Surface Location

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
D	34	31N	6W		1264	FNL	330	WEST	RIO ARriba

¹¹Bottom Hole Location If Different From Surface

UL or lot no.	Section	Township	Range	Lot Idn	Feet from the	North/South line	Feet from the	East/West line	County
Dedicated Acres 320 W/2		Joint or Infill I		Consolidation Code		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 1264' 330'					¹⁷ OPERATOR CERTIFICATION I hereby certify that the information contained herein is true and complete to the best of my knowledge and belief.  Signature DEBORAH MARBERRY Printed Name REGULATORY ANALYST deborah.marberry@conocophillips.com Title and E-mail Address 04/15/2004 Date
					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