

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. NMSF079012
2. Name of Operator CONOCOPHILLIPS COMPANY		6. If Indian, Allottee or Tribe Name
3a. Address P O BOX 2197 WL 6106 HOUSTON, TX 77252		7. If Unit or CA/Agreement, Name and/or No. NMINM78421C
3b. Phone No. (include area code) Ph: 832.486.2326 Fx: 832.486.2764		8. Well Name and No. SAN JUAN 31-6 UNIT 205
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) Sec 4 T30N R6W SWNE 1690FNL 1450FEL 36.84415 N Lat, 107.46364 W Lon		9. API Well No. 30-039-24486-00-S1
		10. Field and Pool, or Exploratory BASIN FRUITLAND COAL
		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"/> Deepen	<input type="checkbox"/> Production (Start/Resume)	<input type="checkbox"/> Water Shut-Off
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Alter Casing	<input type="checkbox"/> Fracture Treat	<input type="checkbox"/> Reclamation	<input type="checkbox"/> Well Integrity
<input type="checkbox"/> Final Abandonment Notice	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> New Construction	<input type="checkbox"/> Recomplete	<input checked="" type="checkbox"/> Other Workover Operations
	<input type="checkbox"/> Change Plans	<input type="checkbox"/> Plug and Abandon	<input type="checkbox"/> Temporarily Abandon	
	<input type="checkbox"/> Convert to Injection	<input type="checkbox"/> Plug Back	<input type="checkbox"/> Water Disposal	

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 recompleat 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 recompleat 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.)

This well is a pressure observation well that recently failed a packer leakage test. This well is in the restricted winter closure area. The following is our procedure to repair.

1. Hold pre-job safety meeting.
2. MIRU workover rig.
3. Install back pressure valve, nipple down wellhead and nipple up BOP.
4. Pump 1% KCl fluid to load annulus as necessary to maintain well control (took 4 barrels during integrity test). Release packer and pull and remove hanger.
5. POOH with tubing.
6. Run 7? casing scraper from surface to liner top at 3055? KB.
7. RIH with retrievable bridge plug (RBP) and packer. Set the RBP at approximately 3045? and test. Load hole and pressure test casing to 500 psi. If casing holds, unload/swab the well to 2700?.

CONDITIONS OF APPROVAL
Adhere to previously issued stipulations.

14. I hereby certify that the foregoing is true and correct.	
Electronic Submission #51826 verified by the BLM Well Information System For CONOCOPHILLIPS COMPANY, sent to the Farmington Committed to AFMSS for processing by MATTHEW HALBERT on 12/22/2004 (05MXH0261SE)	
Name (Printed/Typed) DEBORAH MARBERRY	Title SUBMITTING CONTACT
Signature (Electronic Submission)	Date 12/13/2004

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved By <u>[Signature]</u>	Title <u>Petr - Eng</u>	Date <u>12/29/04</u>
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

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.

**** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ** BLM REVISED ****

Additional data for EC transaction #51826 that would not fit on the form

32. Additional remarks, continued

release RBP, POOH and proceed to step 9.

8. If the casing does not hold locate casing leak using the packer and pressure testing the casing. Notify Houston of the extent of the leak and a decision will be made on repairing the leak or plugging the well. A squeeze or P&A procedure will be provided at that time.

9. Pick up re-dressed 7" A3 Lockset packer on 2-3/8" tubing and run in hole to approximately 3045'. Start pumping packer fluid, once 75% of the packer fluid is pumped, set packer and land tubing hanger and lock down. Fill remainder of annulus with packer fluid and pressure test to 500 psi. The packer fluid should consist of 1% KCl fluid with 2% Nalco EC 1447A (2 drums). The annular volume should be 107 bbls.

10. ND BOP and NU wellhead.

11. Rig down and move off workover rig.