

submitted in lieu of Form 3160-5
UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

RCVD DEC 14 '11

OIL CONS. DIV.

DIST. 3

Sundry Notices and Reports on Wells

1. Type of Well
GAS

2. Name of Operator

ConocoPhillips

3. Address & Phone No. of Operator

PO Box 4289, Farmington, NM 87499 (505) 326-9700

4. Location of Well, Footage, Sec., T, R, M

Surface: Unit P (SESE), 820' FSL & 715' FEL, Section 35, T28N, R10W, NMPM

RECEIVED

DEC -2 2011

Farmington Field Office
Bureau of Land Management

5. Lease Number
SF-079508
6. If Indian, All. or
Tribe Name
7. Unit Agreement Name

NM NM 91261

8. Well Name & Number
Omler 2S

9. API Well No.

30-045-35071

10. Field and Pool
Basin FC/Fulcher Kutz PC

11. County and State
San Juan, NM

12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA

Type of Submission	Type of Action			
<input checked="" type="checkbox"/> Notice of Intent	<input type="checkbox"/> Abandonment	<input type="checkbox"/> Change of Plans	<input checked="" type="checkbox"/> Other -	<input type="checkbox"/> APD Extension
<input type="checkbox"/> Subsequent Report	<input type="checkbox"/> Recompletion	<input type="checkbox"/> New Construction		
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Plugging	<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		

13. Describe Proposed or Completed Operations

ConocoPhillips wishes to extend the APD approval for the subject well.

This final approval expires 12/15/2013.

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

Signed Arleen Kellywood Arleen Kellywood Title Staff Regulatory Technician Date 12/2/11

(This space for Federal or State Office use)

APPROVED BY Lucy Bee Title LE Date 12/5/2011

CONDITION OF APPROVAL, if any:

Title 18 U.S.C. Section 1001, makes it a crime for any person knowingly and willfully to make any department or agency of the United States any false, fictitious or fraudulent statements or representations as to any matter within its jurisdiction

NMOCD

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