UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

SUNDRY NOTICES AND REPORTS ON WELLS

Do not use this form for proposals to drill or to deepen or reentry to a different reservoir.

Use "APPLICATION FOR PERMIT" - for such proposals.



FORM APPROVED

Budget Bureau No. 1004-0135

JUN 04 2012

Expires: March 31, 1993

Farmington Field Office Bureau of Land Managemen.

1. Type of Well: Gas SF-078433 2. Name of Operator: ConocoPhillips 3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 (805) 326-9770 8. Well Name and Number: NEWSOM 14 4. Location of Well, Footage, Sec. T, R, U: FOOTAGE: 1850 FNL & 1850 FEL 3004505683 S: 29 T: 026N R: 008W U: G DIC - RASIN::DAKOTA 11. County and State: SAN JUAN, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent X Subsequent Report Plugging Back New Construction Final Abandonment Casing Repair Non-Routine Fracturing Abandonment Abandonment Casing Repair Non-Routine Fracturing Abandonment Abandonment Casing Repair Non-Routine Fracturing This well was re-delivered on 3/21/2011 and produced natural gas and entrained hydrocarbons. Notes: THIS WELL WAS SHUT IN MORE THAN 80 DAYS DUE TO LOGGING OFF. 13. Describe Proposed or Completed Operations This well was re-delivered on 3/21/2011 and produced natural gas and entrained hydrocarbons. Notes: THIS WELL WAS SHUT IN MORE THAN 80 DAYS DUE TO LOGGING OFF. 14. I Hereby certify that the foregoing is true and correct. Signed Abandony Title: Staff Regulatory Tech. Date: 6/1/2012 Tyma Sessions ACCEPTED FOR HECORD Title: Staff Regulatory Tech. Date: 6/1/2012 FARMINGTON FIELD OFFICE BY CONDITION OF APPROVAL, if any:		; ;		
2. Name of Operator: COnocoPhilips 3. Address and Phone No. of Operator: P. O. Box 4289, Parmington, NM 87499 8. Well Name and Number: NEWSOM 14 4. Location of Well, Footage, Sec. T, R, U: FOOTAGE: 1850 FNL & 1990 FEL S: 29 T: 026N R: 009W U: G 10. Field and Pool: DK. BASIN:DAKOTA 11. County and State: SAN JUAN, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Infent Recompletion Change of Plans Notice of Infent Rical Abandonment Casing Repair Abandonment Altering Casing Water Shut Off Conversion to Injection 13. Describe Proposed or Completed Operations This well was re-delivered on 3/21/2011 and produced natural gas and entrained hydrocarbons. Notes: THIS WELL WAS SHUT IN MORE THAN 90 DAYS DUE TO LOGGING OFF. TP: 1115 CP: 1100 Initial MCF: 319 Meter No.: 75059 Gas Co.: ENT Proj Type:: REDELIVERY 14. I Hereby certify that the foregoing is true and correct. Signed Title: Staff Regulatory Tech. Date: 6/1/2012 Tajmra Sessions APPROVED BY: Title: Date: FARMINGTON FIELD OFFICE	1. Type of Well:			
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3. Address and Phone No. of Operator: P. O. Box 4289, Farmington, NM 87499 (605) 326-9700 4. Location of Well, Footage, Sec. T, R, U: FOOTAGE: 1860 FNL & 1990 FEL So 3004505683 5: 29 T: 026N R: 006W U: G 10. Field and Pool: DK- BASIN::DAKOTA 11. County and State: SAN JUAN, NM 12. CHECK APPROPRIATE BOX TO INDICATE NATURE OF NOTICE, REPORT, OTHER DATA Notice of Intent X Subsequent Report Plugging Back Abandonment Casing Repair Non-Routine Fracturing Abandonment Abandonment Others Re-Delivery Conversion to Injection 13. Describe Proposed or Completed Operations This well was re-delivered on 3/21/2011 and produced natural gas and entrained hydrocarbons. Notes: THIS WELL WAS SHUT IN MORE THAN 90 DAYS DUE TO LOGGING OFF. 14. Hereby certify that the foregoing is true and correct. Signed Harm Sessions Title: Staff Regulatory Tech. Date: 6/1/2012 FARMINGTON FIELD OFFICE	2. Name of Operator:	v	6. If Indian, allottee or Tribe Name:	
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