

AUG 27 2014

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

FORM APPROVED
OMB No. 1004-0137
Expires: July 31, 2010

5. Lease Serial No. **SF-078999**

6. If Indian, Allottee or Tribe Name

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 page 2.

1. Type of Well
 Oil Well Gas Well Other

7. If Unit of CA/Agreement, Name and/or No.
SAN JUAN 31-6 UNIT

8. Well Name and No.
SAN JUAN 31-6 UNIT 220

2. Name of Operator
ConocoPhillips Company

9. API Well No.
30-039-24987

3a. Address
PO Box 4289, Farmington, NM 87499

3b. Phone No. (include area code)
(505) 326-9700

10. Field and Pool or Exploratory Area
Basin FC

4. Location of Well (Footage, Sec., T., R., M., or Survey Description)
Surface UNIT B (NWNE), 947' FNL & 1521' FEL, Sec. 33, T31N, R6W

11. Country or Parish, State
Rio Arriba, New Mexico

12. CHECK THE 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 MIT
	<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 recomplete 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 must be filed within 30 days following completion of the involved operations. If the operation results in a multiple completion or recompletion in a new interval, a Form 3160-4 must be filed once Testing has been completed. Final Abandonment Notices must be filed only after all requirements, including reclamation, have been completed and the operator has determined that the site is ready for final inspection.)

**RCVD SEP 5 '14
OIL CONS. DIV.
DIST. 3**

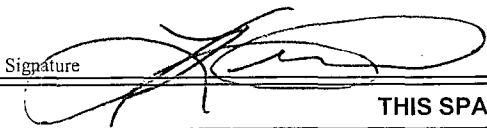
ConocoPhillips intends to perform an MIT test on subject well as per the NMOCD regulations requiring MIT every 5 years. The last MIT was performed 9/22/09. Procedure is attached.

Notify NMOCD 24 hrs prior to beginning operations

BLM'S APPROVAL OR ACCEPTANCE OF THIS ACTION DOES NOT RELIEVE THE LESSEE AND OPERATOR FROM OBTAINING ANY OTHER AUTHORIZATION REQUIRED FOR OPERATIONS ON FEDERAL AND INDIAN LANDS

14. I hereby certify that the foregoing is true and correct. Name (Printed/Typed)
Kenny Davis

Title **STAFF REGULATORY TECHNICIAN**

Signature 

Date **8/27/2014**

THIS SPACE FOR FEDERAL OR STATE OFFICE USE

Approved by **Troy Salyers**
 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.

Title **Petroleum Eng.** Date **9/3/2014**
Office **FFO**

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.

ConocoPhillips
SAN JUAN 31-6 UNIT 220 POW
Expense - MIT

Lat 36° 51' 38.34" N

Long 107° 27' 49.86" W

PROCEDURE

1. Hold pre-job safety meeting. Comply with all NMOCD, BLM, and COPC safety and environmental regulations.
2. MIRU pressure testing truck. Check casing and bradenhead pressures and record them in Wellview. **If there is pressure on the BH, contact Wells Engineer.**
3. Connect the pressure testing truck to the casing. Verify that casing is filled with proper fluid.
4. **Notify necessary regulatory agencies 24 hours prior to MIT.** MIT the casing to 560 psi for 30 minutes on a 2 hour chart with 1000# spring. Record pressure test in Wellview and notify wells engineer and superintendent of the results. Bring the chart to the wells engineer.
5. RD and release test unit.

Current Schematic

ConocoPhillips

Well Name: SAN JUAN 31-6 UNIT #220

API UWI 3003924987	Surface Legal Location 033-031N-006W-B	Field Name FC	License No.	State Province NEW MEXICO	Well Configuration Type Vertical
Ground Elevation (ft) 6,460.00	Original KSBRT Elevation (ft)	K5-Ground Distance (ft) 6,473.00	13.00	K5-Casing Flange Distance (ft)	K5-Tubing Hanger Distance (ft) 6,473.00

Vertical - Original Hole, 8/19/2014 1:14:59 PM

