Form 3160-5 (August 1999)

UNITED STATES DEPARTMENT OF THE INTERIOR

BUREAU OF LAND MANAGEMENT

FORM APPROVED OMB No. 1004-0135 Expires November 30, 2000

Э.	Le	ase	Sei	lai	INO
S	F0:	784	160)	

Do not use this form for proposals to drill or to re-enter an abandoned well. Use Form 3160-3 (APD) for such proposals.					31070400		
					an, Allottee or Tribe Name		
SUBMIT IN TR		7. If Unit or CA/Agreement, Name and/or No. NMN 78423A 8. Well Name and No.					
1. Type of Well Oil Well X Gas Well							
2. Name of Operator ConocoPhillips Company					SAN JUAN 32-7 UNIT 233A 9. API Well No.		
3a. Address 5525 Highway 64 Farming	3b. Phone No. (include (505)599-3419	le area code)	30-045-3	33096 and Pool, or Exploratory Area			
4. Location of Well (Footage, Sec., T., R., M., or Survey Description) 1200 NORTH 1200 WEST UL. D, Sec. 20, T: 32N, R: 7W					BASIN FRUITLAND COAL 11. County or Parish, State SAN JUAN NM		
12. CHECK AI	PPROPRIATE BOX(ES) TO	INDICATE NATUR	RE OF NOTICE, R	EPORT, OF	R OTHER DATA		
TYPE OF SUBMISSION		TY	PE OF ACTION				
☐ Notice of Intent ☐ Subsequent Report	Acidize Alter Casing Casing Repair	□ Deepen□ Fracture Treat□ New Construction	Production (Stan Reclamation Recomplete	rt/ Resume)	☐ Water Shut-Off ☐ Well Integrity ☐ Other		
☐ Final Abandonment Notice	Change Plans Convert to Injection	☐ Plug and Abandon ☐ Plug Back	☐ Temporarily Ab				
If the proposal is to deepen dire Attach the Bond under which the following completion of the inv	ectionally or recomplete horizontall he work will be performed or provisor of the operations. If the operation real Abandonment Notices shall be fay for final inspection.)	y, give subsurface location de the Bond No. on file wit esults in a multiple comple	s measured and true ver h BLM/BIA. Required tion or recompletion in a	tical depths of subsequent rep new interval,	ports shall be filed within 30 days a Form 3160-4 shall be filed once		
2010 017 1101 00100. 117077		- T	E 19 19 19 19 19 19 19 19 19 19 19 19 19		\(\bar{c}\)		

Casing Pressure: Fubing Pressure: Meter Number: Fransportor:	418 psig shut-in 0 psig shut-in 32733170 Williams Field Service	NOV 2005 HELE DO DIST. 3
		25 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2 3 2

RECEIVED

D FARMINGTON NM

14. I hereby certify that the foregoing is true and correct Name (Printed/Typed)	Title						
Juanita Farrell	Regulatory Analyst	ACCEPTED FOR RECORD					
Signature Fairell	Date 11/11/2005	ACCEPTED FOR RECORD					
THIS SPACE FOR FEDERAL OR STATE OFFICE USE							
Approved by	Title	FARMING TON DISTRICT OFFICE					
Conditions of approval, if any, are attached. Approval of this notice does not warra certify that the applicant holds legal or equitable title to those rights in the subject leads which would entitle the applicant to conduct operations thereon.							