

Submitted in lieu of Form 3160-5 (June 1990)

OIL CONS. DIV DIST. 3

UNITED STATES
DEPARTMENT OF THE INTERIOR
BUREAU OF LAND MANAGEMENT

OCT 20 2015

SUNDRY NOTICES AND REPORTS ON WELLS

FORM APPROVED
Budget Bureau No. 1004-0135
Expires: March 31, 1993

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.

1. Type of Well:

Gas

5. Lease Number:

E-3521-4

2. Name of Operator:

ConocoPhillips

6. If Indian, allottee or Tribe Name:

3. Address and Phone No. of Operator:

P. O. Box 4289, Farmington, NM 87499
(505) 326-9700

7. Unit Agreement Name:

8. Well Name and Number:

MIMS 36 STATE COM 1M

4. Location of Well, Footage, Sec. T, R, U:

FOOTAGE: 1365' FSL & 1900' FWL
S: 36 T: 030N R: 011W U: K

9. API Well No.

3004530890

10. Field and Pool:

CH - OTERO::CHACRA
DK - BASIN::DAKOTA
MV - BLANCO::MESAVERDE

11. County and State:

SAN JUAN, NM

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

<input type="checkbox"/> Notice of Intent	<input type="checkbox"/> Recompletion	<input type="checkbox"/> Change of Plans
<input checked="" type="checkbox"/> Subsequent Report	<input type="checkbox"/> Plugging Back	<input type="checkbox"/> New Construction
<input type="checkbox"/> Final Abandonment	<input type="checkbox"/> Casing Repair	<input type="checkbox"/> Non-Routine Fracturing
<input type="checkbox"/> Abandonment	<input type="checkbox"/> Altering Casing	<input type="checkbox"/> Water Shut Off
	<input checked="" type="checkbox"/> Other- Re-Delivery	<input type="checkbox"/> Conversion to Injection

13. Describe Proposed or Completed Operations

This well was re-delivered on 10/5/2015 and produced natural gas and entrained hydrocarbons.

Notes: WELL SHUT-IN MORE THAN 90 DAYS DUE TO TBG ISSUES

TP: 399 CP: 543 Initial MCF: 1500

Meter No.: 85716

Gas Co.: ENT

Proj Type.: REDELIVERY

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

Signed *Satal Walker* Title: Staff Regulatory Tech. Date: 10/16/2015

(This Space for Federal or State Office Use)

APPROVED BY: _____ Title: _____ Date: _____

CONDITION OF APPROVAL, if any: _____

KC